No. <b>W 76479</b>		Due no later than Jul 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		STACY JONES 7066 HACIENDA WY NAMPA ID 83686  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  GOLD BUCKLE DREAMS THERAPEUTIC RIDING CENTER LLC STACY JONES 7066 HACIENDA WY NAMPA ID 83686					
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses of a	at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER RYKER O JC		ONES	7066 HACIENDA WAY	NAMPA	ID	USA	83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Stacy Jones		Date: 08/07/2012			
W 76479		Name (type or print): Stacy Jones		Title: Ownder			
Processed 08/07/2012 * Electronically provided signatures are accepted as original signatures.							