

No. W 74136		Due no later than May 31, 2012		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. JOHN A. WOLFE PH.D. LLC AND ASSOCIATES JOHN A WOLFE PHD 2199 IRONWOOD CENTER DR COEUR D ALENE ID 83814 USA		JOHN A WOLFE PHD 2199 IRONWOOD CENTER DR COEUR D'ALENE ID 83814	
				3. <u>New</u> Registered Agent Signature: *	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	JOHN A WOLFE PHD	2199 IRONWOOD CENTER DR	COEUR D'ALENE	ID	USA 83814
5. Organized Under the Laws of: ID W 74136		6. Annual Report must be signed.* Signature: John A Wolfe PhD Name (type or print): John A Wolfe PhD Date: 03/13/2012 Title: Member			
Processed 03/13/2012		* Electronically provided signatures are accepted as original signatures.			