No. <b>W 30822</b>	Due no later than May 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		C WYN BOWMAN			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  IDAHO WOLVES SOCCER ACADEMY, LLC CHARLES W. BOWMAN 1461 THREE FOUNTAINS DRIVE		1461 THREE FOUNTAINS DRIVE IDAHO FALLS ID 83404-5626			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
	IDAHO FALLS ID 83404-5626		3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
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
MANAGER CHARLES	W. BOWMAN	1461 THREE FOUNTAINS DRIVE	IDAHO FALLS	ID	USA	83404-5626
5. Organized Under the Laws of:	6. Annual Report	must be signed.*				
ID	Signature: C. Wyn Bowman		Date: 03/24/2011			
W 30822	Name (type or print): C. Wyn Bowman		Title: Managing Member			
Processed 03/24/2011	* Electronically provided signatures are accepted as original signatures.					