

No. W 36821		Due no later than Feb 28, 2006		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		MARJORIE STIMPSON 949 TROTTER DR TWIN FALLS ID 83301 0000	
		1. Mailing Address: Correct in this box if needed. STIMPSON DAYCARE, L.L.C. MARJORIE STIMPSON 949 TROTTER DR TWIN FALLS ID 83301 0000		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	MARJORIE STIMPSON	949 TROTTER DR	TWIN FALLS	ID	83301
MEMBER	DICK STIMPSON	949 TROTTER DR	TWIN FALLS	ID	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
IDAHO W 36821		Signature: Marjorie Stimpson		Date: 02/28/2006	
		Name (type or print): Marjorie Stimpson		Title: Member	
Processed 02/28/2006		* Electronically provided signatures are accepted as original signatures.			