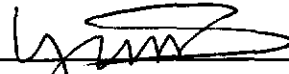


No. W 7740	Due no later than January 31, 2009 Annual Report Form 1. Mailing Address - Correct in this box, if applicable MOTHER'S CHOICE CHILD CARE, LLC TIRA L JONES <i>old owner</i> 1604 PENNINGER DR <i>Not to be on this form.</i> BOISE, ID 83709	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		WILLIAM J WALGAM II 1604 PENNINGER DR BOISE, ID 83709-2751 3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Managers members	William WALGAMOTT	1604 Penningers DR.	Boise	ID	83709
manager member	Cindy Walgamott	1604 Penninger Dr.	Boise	ID	83709

5. Organized Under the Laws of: IDAHO W 7740	6. Signature  Name (Typed or Printed) <u>William J. WALGAMOTT II</u> Title <u>manager member</u> Date <u>11.16.2008</u>
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