

FILED EFFECTIVE**REINSTATEMENT**

No. W 44917	Annual Report Form ADMIN DISSOLVED 02/06/2008	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable IDAHO SOCCER ACADEMY, LLC (THE) CHRIS WATTS 1191 CABIN COVE IDAHO FALLS, ID 83404	2. Registered Agent and Office NOT A P.O. BOX CHRIS WATTS 1191 CABIN COVE IDAHO FALLS, ID 83404
		3. <u>New registered agent signature</u>
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. Office held <u>Name</u> <u>Street or P.O. Address</u> <u>City</u> <u>State</u> <u>Zip</u> <u>MANAGER</u> <u>CHRISTOPHER E. 1191 CABIN COVE</u> <u>IDAHO FALLS, ID</u> <u>83404</u> <u>WATTS</u>		
5. Organized under the laws of: IDAHO W 44917	6. <u>Signature</u> <u>Christopher E. WATTS</u> <u>Date</u> <u>02-23-08</u> <u>Name (Typed or Printed)</u> <u>CHRISTOPHER E. WATTS</u> <u>Title</u> <u>MANAGER</u>	

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