

No. W 74781		Due no later than May 31, 2010 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. WEE CARE ACADEMY, LLC KELLY J SAVIANO 8940 W CHERRY LN NAMPA ID 83687		KELLY J SAVIANO 8940 W CHERRY LN NAMPA ID 83687			
				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	KELLY J SAVIANO	8940 W CHERRY LN	NAMPA	ID	USA	83687	
5. Organized Under the Laws of: ID W 74781		6. Annual Report must be signed.* Signature: Kelly J. Saviano Name (type or print): Kelly J. Saviano Date: 03/11/2010 Title: Director					
Processed 03/11/2010		* Electronically provided signatures are accepted as original signatures.					