

No. <b>W 80704</b>	<b>Due no later than Jan 31, 2010</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  BREAKPOINT LEARNING, LLC KIT FUREY 1904 SOUTH LAKE HERON LN BOISE ID 83706-4042	KIT FUREY 1904 LAKE HERON LN BOISE ID 83706	
		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	KIT FUREY	1904 SOUTH LAKE HERON LANE	BOISE ID USA 83706-4046
5. Organized Under the Laws of:  <b>ID          W 80704</b>	6. Annual Report must be signed.* Signature: Kit Furey Date: 03/31/2010 Name (type or print): Kit Furey Title: Member		
Processed 03/31/2010		* Electronically provided signatures are accepted as original signatures.	