

No. <b>W 48025</b>		<b>Due no later than Mar 31, 2015</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>1. Mailing Address: Correct in this box if needed.</b>  TAYLOR STUDY METHOD, LLC (THE) DAVID GENCARELLA PO BOX 729 POST FALLS ID 83877-0729 USA		DAVID GENCARELLA 6530 E MAPLEWOOD AVE POST FALLS 83854-7070			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name DAVID GENCARELLA	Street or PO Address PO BOX 729		City POST FALLS	State ID	Country	Postal Code 83877
5. Organized Under the Laws of:  <b>ID</b> <b>W 48025</b>		6. Annual Report must be signed.*  Signature: David Gencarella Name (type or print): David Gencarella  Date: 02/12/2015 Title: Manager					
Processed 02/12/2015 * Electronically provided signatures are accepted as original signatures.							