

No. W 24991		Due no later than Jul 31, 2009		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. EQUESTRIAN CENTER LLC (THE) JENNIFER HARVEY 4455 SELLE RD SANDPOINT ID 83864 USA		SAMANTHA HARVEY 4455 SELLE RD SANDPOINT ID 83864			
				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	SAMANTHA HARVEY	4455 SELLE RD	SANDPOINT	ID	USA	83864	
MEMBER	JENNIFER HARVEY	213 WINTERBERRY WAY	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of: ID W 24991		6. Annual Report must be signed.* Signature: Jennifer Harvey Name (type or print): Jennifer Harvey Date: 08/24/2009 Title: Member					
Processed 08/24/2009		* Electronically provided signatures are accepted as original signatures.					