

|  |                  |   |           |  |                                  |             |  |
|--|------------------|---|-----------|--|----------------------------------|-------------|--|
| No. <b>W 90496</b>   |                  | <b>Due no later than Feb 28, 2013</b>   |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>       |                                  |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>TAMMY'S TOTS PRESCHOOL LLC<br>TAMARA L SWALLOW<br>1428 LOS ALTOS WAY<br>POCATELLO ID 83201<br>USA |           | TROY SWALLOW<br>1428 LOS ALTOS WAY<br>POCATELLO ID 83201 |                                  |             |  |
|  |                  |   |           | 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   | TAMARA L SWALLOW | 1428 LOS ALTOS WAY  | POCATELLO | ID   | USA                              | 83201       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 90496</b>   |                  | 6. Annual Report must be signed.*<br>Signature: Tamara L Swallow<br>Name (type or print): Tamara L Swallow  |           |  | Date: 12/28/2012<br>Title: Owner |             |  |
| Processed 12/28/2012   |                  | * Electronically provided signatures are accepted as original signatures.   |           |  |                                  |             |  |