

No. W 74495		Due no later than May 31, 2016 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		1. Mailing Address: Correct in this box if needed. STACI'S SWIM SCHOOL LLC. STACI R MALLETT 2679 POLELINE RD EAST TWIN FALLS ID 83301		STACI MALLETT 2679 POLELINE RD EAST TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				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	STACI MALLETT	2679 POLELINE RD EAST	TWIN FALLS	ID	83301		
MEMBER	SEAN MALLETT	2679 POLELINE RD EAST	TWIN FALLS	ID	83301		
5. Organized Under the Laws of: ID W 74495		6. Annual Report must be signed.* Signature: Staci Mallett Name (type or print): Staci Mallett Date: 04/13/2016 Title: Member					
Processed 04/13/2016 * Electronically provided signatures are accepted as original signatures.							