No. C 155759		Due no later than Jul 31, 2012		2. Registered A	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. FANTASYLAND DAYCARE, INC. JONI R WEST 1131 W CHERRY LANE MERIDIAN ID 83642 USA		1131 W CHE MERIDIAN II	JONI R WEST 1131 W CHERRY LANE MERIDIAN ID 83642 3. New Registered Agent Signature:*			
		 ess Addresses o	f President, Secretary, and Directors. Treast	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
VICE PRESIDENT DIRECTOR PRESIDENT	ROBERT A WEST MICHELLE L BENART JONI R WEST		1943 NW. 11TH 5308 TOSCANA 1943 NW. 11TH AVE	MERIDIAN MERIDIAN MERIDIAN	ID ID ID	USA USA USA	83646 83646 83646	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 155759		Signature: Joni R West Name (type or print): Joni R West			Date: 06/26/2012 Title: President			
Processed 06/26/2012 * Electronically provided signatures are accepted as original signatures.								