

No. W 28341	Due no later than February 28, 2009 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		AMANDA DASTRUP 2486 IRONWOOD AVE TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature																		
	EASTLAND CHILDCARE ACADEMY, LLC 2486 IRONWOOD AVE TWIN FALLS, ID 83301																				
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>AMANDA DASTRUP</td> <td>2486 IRONWOOD AVE</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>MEMBER</td> <td>MARCELLA BLASS</td> <td>534 MEADOWLARK WAY</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MEMBER	AMANDA DASTRUP	2486 IRONWOOD AVE	TWIN FALLS	ID	83301	MEMBER	MARCELLA BLASS	534 MEADOWLARK WAY	TWIN FALLS	ID	83301	
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5. Organized Under the Laws of: IDAHO W 28341	8. Signature <u>Marcella Blass</u> Name (Typed or Printed) <u>MARCELLA BLASS</u>		Date <u>2-10-09</u> Title <u>MEMBER</u>																		

Issued 12/01/2008

Do Not Tape or Staple