No. W 97118		Due no later than Oct 31, 2011		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. WILD ADVENTURE CORN MAZE LLC SHAWN STOLWORTHY 475 E 1000 N		475 E 1000 FIRTH ID	SHAWN STOLWORTHY 475 E 1000 N FIRTH ID 83236			
NO FILING FEE IF RECEIVED BY DUE DATE		FIRTH ID 83236 3. New Registered Agent Signature ames and Addresses of at least one Member or Manager.		ignature:*				
Office Held	Name	mes and Addresses	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SHAWN STOLWORTHY		475 E 1000 N	FIRTH	ID	USA	83236	
5. Organized Under the Laws of: ID W 97118		6. Annual Report Signature: Sha		Date: 11/07/2011				
		Name (type or		Title: Manager				
Processed 11/07/2011	rocessed 11/07/2011 * Electronically provided signatures are accepted as original signatures.							