No. <b>W 74967</b>	Due no later than Jun 30, 2013		2	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form			LAURIE LEWIS				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		d.	854 TWO TAIL RD BONNERS FERRY ID 83805				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	WONDERHORSE RANCH LLC LAURIE LEWIS 854 TWO TAIL RD BONNERS FERRY ID 83805							
			3	3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	USA	USA						
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	
MANAGER LAURIE LEWIS		854 TWO TAIL RD		BONNERS FERRY	ID	USA	83805	
MANAGER DARRELL	854 TWO TAIL RD		BONNERS FERRY	ID	USA	83805		
5. Organized Under the Laws of: 6. Annual Report mu		pe signed.*						
ID	Signature: Laurie Lev	Signature: Laurie Lewis		Date: 06/21/2013				
W 74967	Name (type or print): Laurie Lewis			Title: Manager				
Processed 06/21/2013	* Electronically provided signatures are accepted as original signatures.							