No. **W 58507**	**Due no later than Jan 31, 2010** **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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** 5 STAR DRYWALL LLC CLIFFORD K WUTZKE 1034 ATLANTIC DR BURLEY ID 83318	CLIFFORD KELLY WUTZKE 1034 ATLANTIC DR BURLEY ID 83318 3. New 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	CLIFFORD KELLY WUTZKE	1034 ATLANTIC DR	BURLEY	ID	USA	83318

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 58507**	Signature: Clifford Wutzke	Date: 01/29/2010
	Name (type or print): Clifford Wutzke	Title: Member

Processed 01/29/2010

* Electronically provided signatures are accepted as original signatures.