No. C 150589		ue no later than Aug 31, 2009	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		WILLIAM K MEADE II 1700 N TRAIL CREEK WAY EAGLE ID 83616			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
	1700 N TRA	1700 N TRAIL CREEK WAY EAGLE ID 83616-4098		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	EAGLE ID 8						
4. Corporations: Enter Names and	Business Addresses o	f President, Secretary, and Directors. Treasur	er (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	m k meade II	1700 N. TRAIL CREEK WAY	EAGLE	ID	USA	83616-4098	
SECRETARY BETH	A MEADE	1700 N. TRAIL CREEK WAY	EAGLE	ID	USA	83616-4098	
5. Organized Under the Laws of: 6. Annual		ort must be signed.*					
п	Signature: E	Signature: Beth A Meade		Date: 08/21/2009			
C 150589	Name (type	Name (type or print): Beth A Meade		Title: Secretary			
Processed 08/21/2009	* Electronically provided signatures are accepted as original signatures.						