


No. <b>W 40090</b>	<b>Due no later than 6/30/2009 Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		CATHIE WASICK 3179 S WHITEPOST WAY EAGLE ID 83616	
	SAW PARTNERS, LLC 3179 S WHITEPOST WAY EAGLE ID 83616		3. <u>New</u> 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 Zip
Managing Member Cathie Wasick 3179 S Whitepost Way Eagle ID 83616				
5. Organized Under the Laws of:  <b>ID W 40090</b>		6. Annual Report must be signed. Signature:  Date: 5/1/09 Name(type or print): Cathie Wasick Title: Mgr Member		

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