No. **W 94276**	**Due no later than Jun 30, 2011** **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.** FREIGHTLINER OF IDAHO, LLC PO BOX 1746 TWIN FALLS ID 83303-1746	BART WARNER 1000 CENTENNIAL SPUR JEROME ID 83338 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
MANAGER	BART WARNER	P O BOX 1746	TWIN FALLS	ID	USA	83303

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 94276**	Signature: Bart Warner	Date: 04/14/2011
	Name (type or print): Bart Warner	Title: Manager

Processed 04/14/2011

* Electronically provided signatures are accepted as original signatures.