

STATE OF IDAHO BEN YSURSA SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080

PRESORTED FIRST-CLASS U.S. POSTAGE PAID Bolse, ID PERMIT No. 1

IDAHO ANNUAL REPORT FORM W 31420 RETURN SERVICE REQUESTED Use this form to file online at www.sos.idaho.gov

THIS IS THE ONLY NOTICE YOU WILL RECEIVE

KEN WOOD, LLC PO BOX 459 83616 GREENLEAF, ID

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No. Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Due no later than June 30, 2007 Annual Report Form 1. Mailing Address - Correct in this box. If applicable KEN WOOD, LLC PO BOX 459 GREENLEAF, ID 83618	Registered Agent and Office NO PO BOX KENNETH J WOOD 23316 ODE LN CALDWELL, ID 83507 New Registered Agent Signature
Cettoe held Name	nies: Enter Names and Addresses of Members. Street or P.O. Address Whod Po Box 459 Green lea	Starte Zip F Jd 83626 F Jd 83626
5. Organized Under the Laws of: IDAHO W 31420 Issued 04/02/2007	Name Printed V. Word Name Printed V. Warne Printed V. Warnell J. Warnell J. Warnell Do Not Tape or Staple Fold, seal and mall this portion.	Date 7-29-07 Title OWNEr 200706006503

Detach at this perforation and discard this lower portion.

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- BLOCK 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- BLOCK 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box
- BLOCK 3: Only a new registered agent must sign in Block 3.
- BLOCK 4: Enter names and business addresses of president, secretary, and directors (for corporations only), managers/members (for LLC's Only), one or more general partners (for LP's only). Note: Putting "same as last year" or "same as above" or leaving the block blank will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.
- BLOCK 5: May not be altered through the use of this form.
- BLOCK 6: The annual report must be signed by a person authorized to represent the corporation/LLC/LP. Print or type the name and title of the signer below the signature.
- ** The image of this form will be available on the internet once it is filed. DO NOT enter Social Security Numbers. If the (Corporation/Limited Liability Company/Limited Partnership) is no tonger doing business in idaho, you may file the appropriate form and fee. Forms are available on our website at www.ldsos.state.id.us. However, if no timely annual report is filed, administrative action with be taken, at no cost to the (Corporation/Limited Liability Company/Limited Partnership). However, if no timely annual report is filed, administrative action with be taken, at no cost to the Corporation/Limited Liability Company/Limited Partnership). NOT SET WILL NOT BE ACCEPTED

 POSTMARK DATES WILL NOT BE ACCEPTED

REV. (9/06)