No. **W 52066**	**Due no later than Jun 30, 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.** 17 STATE STREET PARTNERS LLC R JOHN TAYLOR PO BOX 538 LEWISTON ID 83501	R JOHN TAYLOR 111 MAIN ST LEWISTON ID 83501 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	R JOHN TAYLOR	PO BOX 538	LEWISTON	ID	USA	83501

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 52066**	Signature: R. John Taylor	Date: 04/20/2010
	Name (type or print): R. John Taylor	Title: Manager

Processed 04/20/2010

* Electronically provided signatures are accepted as original signatures.