


No. W 2213	Due no later than March 31, 2006 Annual Report Form		2. Registered Agent and Office 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 applicable DOTRE TRE, LLC DAVID O JENSEN 389 BIRCH HAVEN DR SAGLE, ID 83860		DAVID O JENSEN 389 BIRCH HAVEN DR SAGLE, ID 83860 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGING Member</td> <td>DAVID O. JENSEN</td> <td>389 Birch Haven Dr,</td> <td>Sagle</td> <td>ID</td> <td>83860</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGING Member	DAVID O. JENSEN	389 Birch Haven Dr,	Sagle	ID	83860
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGING Member	DAVID O. JENSEN	389 Birch Haven Dr,	Sagle	ID	83860										
5. Organized Under the Laws of: IDAHO W 2213	6. Signature  Date 1-11-06 Name (Typed or Printed) David O. Jensen Title Mgr. Member														

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Do Not Tape or Staple

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