No. **W 7075**	**Due no later than Oct 31, 2009** **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.** CDT IV ENTERPRISES, LLC S CARL NICOLAYSEN PO BOX 607 MERIDIAN ID 83680	S CARL NICOLAYSEN 455 W AMITY MERIDIAN ID 83642 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	S CARL NICOLAYSEN	P O BOX 607	MERIDIAN	ID	USA	83680

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 7075**	Signature: S. Carl Nicolaysen	Date: 09/03/2009
	Name (type or print): S. Carl Nicolaysen	Title: Manager

Processed 09/03/2009

* Electronically provided signatures are accepted as original signatures.