

No. W 20877		Due no later than Sep 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. ROBERT S. CONNER LLC ROBERT S. CONNER PO BOX 392 NEW MEADOWS ID 83654		ROBERT S CONNER 417 SPEER ST NEW MEADOWS ID 83654		3. <u>New</u> 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	ROBERT S CONNER	417 SPEER ST	NEW MEADOWS	ID	USA	83654	
5. Organized Under the Laws of: ID W 20877		6. Annual Report must be signed.* Signature: Robert S. Conner Name (type or print): Robert S. Conner		Date: 09/06/2011 Title: Owner			
Processed 09/06/2011		* Electronically provided signatures are accepted as original signatures.					