No. W 17439		Due no later than Dec 31, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JOHN A SWALLOW			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address TOWNSEND HOLDIN JOHN A SWALLOW 905 S JARVIS RD COEUR D ALENE ID		COEUR D'ALENE	421 1/2 SHERMAN AVE #208 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*		
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Comp	anies: Enter Na	mes and Addresses of a	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER	MANAGER JOHN A SWALLOW		905 S JARVIS RD	COEUR D'ALENE	ID	USA	83814
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: John A Swallow		Date: 11/08/2009			
W 17439		Name (type or print): John A Swallow		Title: Manager			
Processed 11/08/2009 * Electronically provided signatures are accepted as original signatures.							