

No. <b>W 37527</b>	Due no later than <b>March 31, 2009</b>	2. Registered Agent and Office <b>NO PO BOX</b>
Return to: <b>SECRETARY OF STATE</b> <b>450 NORTH FOURTH STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>	<b>Annual Report Form</b>	<b>SUZANNE M KWAPICH</b>
	1. Mailing Address - Correct in this box, if applicable  <b>SUZANNE M. KWAPICH, LLC</b> <b>PO BOX 5733</b> <b>KETCHUM, ID 83340</b>	<b>540 SECOND AVE N STE B</b> <b>KETCHUM, ID 83340</b>
<b>NO FILING FEE IF</b>		3. <u>New</u> Registered Agent Signature
<b>RECEIVED BY DUE DATE</b>		

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
OWNER/MEMBER	SUZANNE M. KWAPICH	P.O. Box 5733	KETCHUM	ID	83340

5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 37527</b>	6. Signature <u>Suzanne M. Kwapich</u> Date <u>2/27/09</u>  Name (Typed or Printed) <u>SUZANNE M. KWAPICH</u> Title <u>OWNER/MEMBER</u>
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