

No. W 16293		Due no later than Aug 31, 2005		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. CHOKECHERRY PICKINS' LIMITED COMPANY ANNA MANWARING 2031 DUCHESS DR IDAHO FALLS ID 83401 0000		KIPP MANWARING 490 N MAPLE ST BLACKFOOT ID 83221 0000			
				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	ANNA MANWARING	2031 DUCHESS DR	IDAHO FALLS	ID		83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
IDAHO W 16293		Signature: Anna Manwaring				Date: 06/08/2005	
		Name (type or print): Anna Manwaring				Title: Partner	
Processed 06/08/2005		* Electronically provided signatures are accepted as original signatures.					