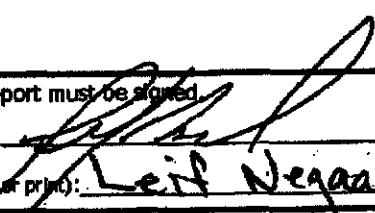


No. <b>C 114275</b>		Due no later than <b>3/31/2009</b> Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		1. Mailing Address: Correct in this box if needed. LEIF NEGAARD, INC. 2003 SAWTOOTH DR POST FALLS ID 83854		LEIF NEGAARD 2003 SAWTOOTH DR POST FALLS ID 83854	
				3. <u>New</u> Registered Agent Signature:	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
Office Held	Name	Street or PO Address	City	State	Zip
	President	Leif Negaard	2003 Sawtooth	Postfalls	ID 83854
	Secretary	Leif Negaard	2003 Sawtooth	Postfalls	ID 83854
5. Organized Under the Laws of: <b>OR</b> <b>C 114275</b>					
6. Annual Report must be signed.		Signature: 		Date: <b>4-23-09</b>	
		Name (type or print): <b>Leif Negaard</b>		Title: <b>Owner</b>	

Issued 4/15/2009 by CLH

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