

No. <b>W 20554</b>		<b>Due no later than Aug 31, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  HOWELL GP, LLC BILL HOWELL PO BOX 848 EAGLE ID 83616		WILLARD W HOWELL 3875 N TRIPLE RIDGE LN EAGLE ID 83616			
				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	
MEMBER	WILLARD W HOWELL	3875 TRIPLE RIDGE LN	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  <b>ID W 20554</b>		6. Annual Report must be signed.* Signature: Willard W. Howell Name (type or print): Willard W. Howell Date: 07/16/2012 Title: Member					
Processed 07/16/2012		* Electronically provided signatures are accepted as original signatures.					