No. W 20494		
Return to:	Due no later than August 31, 2008 Annual Report Form	2 Registered A
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	2. Registered Agent and Office NO PO BOX
450 NORTH FOURTH STREET		MICHAEL R CHAPMAN
BOICE 12 220	""OF MELK CHADMAN	COEUR D ALENE, ID 83814
, 00, 20,000	PO BOX 1600	
NO FILING FEE IF	COEUR D ALENE, ID 83816	SION NIN BIND SE JEN
RECEIVED BY DUE DATE		3. Nem Siegistered Agent Signature
4. Limited Liability Communic		Will Signature
Office have	: Enter Names and Addresses of Managers.	- VIX - X
Office held Name	Street or P.O. Address  Que P. D. Box 1(000)	
Michaely Un	Car D D D	State Zin
	1. 0. BOX 1000 CV	
		ID 83816
		0
		$\int$
•		
		Anna La
. Organized Under the Laws of:	6.	
IDAHO		
W 20494	Signaturé //	on Collegias
	Name Printed or Michael O	Date Ti NOS
Issued 06/02/2008	- Traine Printed) - Trible Oe C	Come Title Monber
	Do Not Tape or Staple	
		200808005417