




No. W 50076	Due no later than Apr 30, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) BARRY ANDERSON RR 1 BOX 756 MOUNTAIN HOME ID 83647
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. BARRY ANDERSON LLC BARRY ANDERSON 1406 E 12TH S MOUNTAIN HOME ID 83647		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	BARRY ANDERSON	1406 E 12TH S	MTN HOME	IDAHO		
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 50076</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u></u> </td> <td style="width: 40%;"> Date: <u>2/28/13</u> </td> </tr> <tr> <td> Name (type or print): <u>BARRY L ANDERSON</u> </td> <td> Title: <u>OWNER</u> </td> </tr> </table>	Signature: <u></u>	Date: <u>2/28/13</u>	Name (type or print): <u>BARRY L ANDERSON</u>	Title: <u>OWNER</u>
Signature: <u></u>	Date: <u>2/28/13</u>				
Name (type or print): <u>BARRY L ANDERSON</u>	Title: <u>OWNER</u>				