

No. <b>C 56695</b>		<b>Due no later than Oct 31, 2009</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> NICK M. LAMANNA, CHTD NICK M. LAMANNA P.O. BOX 789 PRIEST RIVER ID 83856		NICK LAMANNA 1505 9TH STREET PRIEST RIVER ID 83856			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
TREASURER	NICK M. LAMANNA	PO BOX 789	PRIEST RIVER	ID	USA	83856	
PRESIDENT	NICK M. LAMANNA	PO BOX 789	PRIEST RIVER	ID	USA	83856	
SECRETARY	ARLENE NELSON	PO BOX 789	PRIEST RIVER	ID	USA	83856	
DIRECTOR	NICK M. LAMANNA	PO BOX 789	PRIEST RIVER	ID	USA	83856	
5. Organized Under the Laws of:  <b>ID C 56695</b>		6. Annual Report must be signed.* Signature: Nick M Lamanna Name (type or print): Nick M Lamanna Date: 12/30/2009 Title: President					
Processed 12/30/2009		* Electronically provided signatures are accepted as original signatures.					