No. **W 68361**	**Due no later than Nov 30, 2009**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** ANGELO CLEON ENTERPRISES LLC ANDREA P JENSEN 1744 W. WILDFLOWER LN TWIN FALLS ID 83301 USA	BLAKE B JENSEN 1744 W. WILDFLOWER LN TWIN FALLS ID 83301 3. New 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	BLAKE B JENSEN	1744 W. WILDFLOWER LN.	TWIN FALLS	ID	USA	83301

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 68361**	Signature: Andrea Jensen	Date: 01/05/2010
	Name (type or print): Andrea Jensen	Title: Office Manager

Processed 01/05/2010

* Electronically provided signatures are accepted as original signatures.