

No. W 27016

**Due no later than November 30, 2007  
Annual Report Form**

**2. Registered Agent and Office NO PO BOX**

Return to:  
**SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080**

1. Mailing Address - Correct in this box, if applicable

**J.O.E. LIMITED LIABILITY COMPANY (T)  
1520 ELK CREEK DR  
IDAHO FALLS, ID 83404**

**EVAN O JOHNSON  
1520 ELK CREEK DR  
IDAHO FALLS, ID 83404**

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

**3. New Registered Agent Signature**

**4. Limited Liability Companies: Enter Names and Addresses of Managers.**

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Evan O. Johnson	1520 Elk Cr. Dr., Id. Falls, Id.			83404
Manager	Jaylene Johnson	1520 Elk Cr. Dr., Id. Falls, Id.			83404

**5. Organized Under the Laws of:**

**IDAHO  
W 27016**

6. Signature Evan O. Johnson Date 9/10/07  
Name (Typed or Printed) Evan O. Johnson Title Manager

Issued 09/04/2007

**Do Not Tape or Staple**

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