No. W 62123		Due no later than Apr 30, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		KAREN JOHNSON 3680 MAYWOOD DR			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SHEEP CREEK RAN KATHY R. BAKER PO BOX 219	,	BOISE ID 83	BOISE ID 83704			
NO FILING FEE IF RECEIVED BY DUE DATE	PROVIDENCE UT	PROVIDENCE UT 84332		3. <u>New</u> 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	
MANAGER DORAN J MANAGER KATHY A	BAKER GNES RIVARD BAKER	PO BOX 219 PO BOX 219	PROVIDENCE PROVIDENCE	<u>ர</u> ர	USA USA	84332 84332	
5. Organized Under the Laws of: 6. Annual Report		st be signed.*					
ID	ID Signature: Kathy A.R. Baker		Date: 02/11/2010				
W 62123	Name (type or pri	Name (type or print): Kathy A.R. Baker		Title: Manager			
Processed 02/11/2010	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					