


No. W 5800	Due no later than March 31, 2008 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable	STEVEN S SULLIVAN 1935 S 5TH AV POCATELLO, ID 83201
	SULLIVAN'S TRAILER PARK LLC STEVEN S SULLIVAN 1935 S 5TH AV POCATELLO, ID 83201	
3. <u>New</u> 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>
	DENNIS L. Sullivan	1066 E. FLEETWOOD CT,	BOISE	ID	83706
	STEVEN S. Sullivan	4305 HENDERSON LN,	POCATELLO	ID	83202

5. Organized Under the Laws of: IDAHO W 5800	6.  Signature _____ Date <u>1-10-08</u> Name (Typed or Printed) <u>Steven S. Sullivan</u> Title _____
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