No. W 59458	Due no later than February 28, 2	009	2. Registered Age	nt and Office NO P	O BO
Return to:	Annual Report Form  1. Mailing Address - Correct in this box, if appl	licable	EDWIN L LITTEN	EKER	
SECRETARY OF STATE			322 MAIN ST	2504	
450 NORTH FOURTH STREET			LEWISTON, ID 8	3501	
PO BOX 83720	HC 64 BOX 89 PIERCE, ID 83546			•	
BOISE, ID 83720-0080	FIERCE, ID 03540				
			<ol><li>New Registered</li></ol>	Agent Signature	
NO FILING FEE IF	ļ			*	
RECEIVED BY DUE DATE					
	nies: Enter Names and Addresses of Memb	ers.			
Office held Name	Street or P.O. Address	City	State	7in	
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Owner Daniel;			re Id	2.6 40	<i>41</i>
·			L_Date_	3-1-09	<i>Y</i> [
. Organized Under the Laws of: IDAHO	6. Signature <u>Wasselk</u>	Kry		3-9-09	<i>Y</i>
. Organized Under the Laws of:		Kry		3-9-09 Owners	y Ja