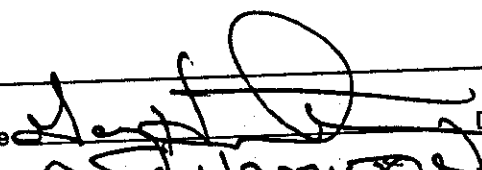


<b>No. W 44001</b>	<b>Due no later than October 31, 2006</b> <b>Annual Report Form</b>	<b>2. Registered Agent and Office NO PO BOX</b>																		
<b>Return to:</b> SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  SUPERIOR TREE, L.L.C. <del>88 SUNNYSIDE DR</del> <b>PO Box 1168</b> <del>JEROME, ID 83338</del> <b>Twin Falls, ID 83303</b>	GARY HAMILTON 88 SUNNYSIDE DR JEROME, ID 83338  <b>3. New Registered Agent Signature</b>																		
<b>4. Limited Liability Companies: Enter Names and Addresses of Members.</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Partner</td> <td>Gary Hamilton</td> <td>PO Box 1168</td> <td>Twin Falls</td> <td>ID</td> <td>83303</td> </tr> <tr> <td>Partner</td> <td>Tom Williamson</td> <td>PO Box 1168</td> <td>Twin Falls</td> <td>ID</td> <td>83303</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Partner	Gary Hamilton	PO Box 1168	Twin Falls	ID	83303	Partner	Tom Williamson	PO Box 1168	Twin Falls	ID	83303
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Partner	Gary Hamilton	PO Box 1168	Twin Falls	ID	83303															
Partner	Tom Williamson	PO Box 1168	Twin Falls	ID	83303															
<b>5. Organized Under the Laws of:</b>  IDAHO W 44001	<b>6.</b> Signature  Date _____ Name (Typed or Printed) <b>GARY HAMILTON</b> Title _____																			

20061001/2006

**Do Not Tape or Staple**

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