

No. <b>W 5967</b>		<b>Due no later than Apr 30, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ANGSTMAN, JOHNSON & ASSOCIATES, PLLC THOMAS J ANGSTMAN 3649 LAKEHARBOR BOISE ID 83703		T J ANGSTMAN 3649 LAKEHARBOR LANE BOISE ID 83703			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	T J ANGSTMAN	3649 LAKE HARBOR LN	BOISE	ID	USA	83703	
MANAGER	WYATT B JOHNSON	3649 LAKEHARBOR	BOISE	ID	USA	83703	
5. Organized Under the Laws of:  <b>ID</b> <b>W 5967</b>		6. Annual Report must be signed.*  Signature: T.J. Angstman Name (type or print): T.J. Angstman					
		Date: 02/10/2010 Title: Manager/Member					
Processed 02/10/2010      * Electronically provided signatures are accepted as original signatures.							