

No. W 62569

**Due no later than May 31, 2009
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**

1. Mailing Address - Correct in this box, if applicable

**JOHN ALAN LLC
PO BOX 673
KETCHUM, ID 83340**

**JOHN A SOFRO
200 SECOND AVE STE 201
KETCHUM, ID 83340**

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New 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>
Manager Member	JOHN SOFRO	P O Box 673	Ketchum	ID	83340

5. Organized Under the Laws of:
**IDAHO
W 62569**

6.
Signature John Sofro Date 3/11/09
Name (Typed or Printed) John Sofro Title Manager
Member

Issued 03/02/2009

Do Not Tape or Staple

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