No. <b>W 515</b>		Due no later than Sep 30, 2011			2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			JOHN MACKEY 398 S 9TH ST STE 260 BOISE ID 83702				
SECRETARY OF STATE		1. Mailing Address: Correct in this box if needed.							
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		KOWALLIS AND MACKEY, IV, L.L.C. JOHN MACKEY 398 S 9TH ST STE 260			DOISE 1D 03/02				
		BOISE ID 83702		3.	3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Companies	: Enter Nar	nes and Addresses o	of at least one Member or Manager.						
Office Held Na	ame		Street or PO Address	(	City	State	Country	Postal Code	
MEMBER DO	DOUG L KO		267 SCHMEIZER ST.	E	BOISE	ID	USA	73706	
MEMBER JO	JOHN MACK		3672 E. ALTA RIDGE CT.	E	BOISE	ID	USA	73716	
5.0		6.4							
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID W 515		Signature: Tammy Cox			Date: 07/14/2011				
		Name (type or print): Tammy Cox			Title: Property Manager				
Processed 07/14/2011		* Electronically provided signatures are accepted as original signatures.							