


No. <b>W 17630</b>		<b>Due no later than Dec 31, 2009 Annual Report Form</b>		2. Registered Agent and Office (NOT A P.O. BOX) <b>JEFFERY C WALBOM 1231 W BROADWAY IDAHO FALLS ID 83402</b>	
Return to: <b>SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</b>		1. Mailing Address: Correct in this box if needed. <b>EAGLE ROCK HOSPITALITY L.L.C. 93 1231 W BROADWAY IDAHO FALLS ID 83402</b>		3. New Registered Agent Signature.	
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
Partner	Jeffery Walbom	1293 W. Broadway	Idaho Falls	ID	83402
Partner	Kirkland Hansen	1293 W. Broadway	Idaho Falls	ID	83402
5. Organized Under the Laws of:		6.			
<b>IDAHO W 17630</b>		Signature: 	Date: 1-15-10		
		Name (type or print): Kirkland Hansen	Title: gm		
Issued 01/13/2010 by CLH					20091207204

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mail delivery, corrected address must be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

**Block 3:** Only a new registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of management. Note: Do not put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.

\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the Limited Liability Company is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the Limited Liability Company to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED

2010 JAN 15 PM 1:27  
 SECRETARY OF STATE  
 OFFICE OF IDAHO