

No. W 37017	Due no later than February 28, 2006		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		GAYLA MOORE												
	1. Mailing Address - Correct in this box, if applicable MEADOWS MOUNTAIN NURSERY LLC. 3248 HWY 55 NEW MEADOWS, ID 83654		3248 HWY 55 NEW MEADOWS, ID 83654 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Gayla moore</td> <td>3248 Hwy 55</td> <td>Newmeadows</td> <td>ID</td> <td>83654</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>	Owner	Gayla moore	3248 Hwy 55	Newmeadows	ID	83654
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Owner	Gayla moore	3248 Hwy 55	Newmeadows	ID	83654										
5. Organized Under the Laws of: IDAHO W 37017		6. Signature <u>Gayla Moore</u> Date <u>12-12-05</u> Name (Typed or Printed) <u>Gayla moore</u> Title <u>owner</u>													

Issued 12/01/2005

Do Not Tape or Staple

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