

No. **W 37017**

**Due no later than February 28, 2006**  
**Annual Report Form**

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

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

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

MEADOWS MOUNTAIN NURSERY LLC.  
3248 HWY 55  
NEW MEADOWS, ID 83654

2. Registered Agent and Office **NO PO BOX**

GAYLA MOORE  
3248 HWY 55  
NEW MEADOWS, ID 83654

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held Name

Street or P.O. Address

Owner Gayla moore

3248 Hwy 55

City

State

Zip  
83654

5. Organized Under the Laws of:

**IDAHO**  
**W 37017**

6.

Signature

Gayla Moore

Date 12-12-05

Name (Typed or  
Printed)

Gayla moore

Title Owner