

No. W 16115

**Due no later than August 31, 2008
Annual Report Form**

2. Registered Agent and Office NO PO BOX

**BARBARA BALSIGER
82169 S HWY 3
ST MARIES, ID 83861**

Return to:
**SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080**

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

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

**ON & ON, ANON., LLC
BARBARA BALSIGER
82169 HWY 3 SOUTH
ST MARIES, ID 83861-7141**

3. New Registered Agent Signature

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

Office held Name

Street or P.O. Address

City

State

Zip

MANAGER BARBARA J BALSIGER 82169 HWY 3 SOUTH ST MARIES ID 83861 7141

MEMBER HEATHER L BALSIGER P O BOX 31 ST MARIES ID 83861 0031

5. Organized Under the Laws of:

**IDAHO
W 16115**

6. Signature

**(Typed or
Printed)**

BARBARA J BALSIGER

Date 7/15/08

Title MANAGER

200808005116