

No. W 60178	Due no later than Mar 31, 2010 Annual Report Form		2. Registered Agent and Address (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	1. Mailing Address: Correct in this box if needed. DOVER VENTURES, LLC DALE A DOVER 640 TIE BREAKER DR AMMON ID 83406 USA		DALE DOVER 640 TIE BREAKER DR AMMON ID 83406			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	DALE DOVER	640 TIE BREAKER DR	AMMON	ID	USA	83406
MEMBER	SANDRA DOVER	640 TIE BREAKER DR	AMMON	ID	USA	83406
5. Organized Under the Laws of: ID W 60178	6. Annual Report must be signed.* Signature: Dale Dover Name (type or print): Dale Dover		Date: 04/11/2010 Title: Member			
Processed 04/11/2010		* Electronically provided signatures are accepted as original signatures.				