

No. W 27002		Due no later than November 30, 2007		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		RIGHTEOUS LC 17 BENTHAMS WALLACE, ID 83873													
		1. Mailing Address - Correct in this box, if applicable CANYON CREEK, L.C. PO BOX 202 SILVERTON, ID 83867		3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers.																	
<table border="1"><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>Manager,</td><td>Righteous, LC,</td><td>P.O. Box 202</td><td>Silvertown,</td><td>ID.</td><td>83867</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>	Manager,	Righteous, LC,	P.O. Box 202	Silvertown,	ID.	83867
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5. Organized Under the Laws of: IDAHO W 27002		6. <table border="1"><tr><td>Signature</td><td><i>Lowell S. Miller, Manager</i></td><td>Date</td><td>9/11/07</td></tr><tr><td>Name (Typed or Printed)</td><td>Lowell S. Miller</td><td>Title</td><td>Manager</td></tr></table>				Signature	<i>Lowell S. Miller, Manager</i>	Date	9/11/07	Name (Typed or Printed)	Lowell S. Miller	Title	Manager				
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Do Not Tape or Staple

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