

No. W 47469

Due no later than February 28, 2009

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

STF LAWN CARE LIMITED LIABILITY COM
SCOTT FISH
PO BOX 382
MOUNTAIN HOME, ID 83647SCOTT FISH
570 E 15TH N
MOUNTAIN HOME, ID 83647NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Partner	Scott Fish	570 E 15 N	Mtn. Home	ID	83647
Partner	Angela Fish	570 E 15 N	Mtn. Home	ID	83647

5. Organized Under the Laws of:

IDAHO
W 47469

6.

Signature



Date

2/16/09

Name (Typed or Printed)

Scott Fish

Title

Partner

Issued 12/01/2008

Do Not Tape or Staple

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