

No. <b>W 52499</b>	<b>Due no later than Jul 31, 2009</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  1503 ORCHARD LLC ABRAHAM LOPEZ 325 E SANTIAGO DR MERIDIAN ID 83646		ABRAHAM LOPEZ 325 E SANTIAGO DR MERIDIAN ID 83642			
			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
MANAGER	ABRAHAM LOPEZ	325 E SANTIAGO DR	MERIDIAN	ID	USA	83646
MANAGER	MIGUEL A LOPEZ	2007 S COVEY PL	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:  <b>ID</b> <b>W 52499</b>	6. Annual Report must be signed.* Signature: Abraham Lopez Name (type or print): Abraham Lopez		Date: 05/19/2009 Title: Manager			
Processed 05/19/2009		* Electronically provided signatures are accepted as original signatures.				