

No. J 1575

Due no later than March 31, 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

CITY SUPPLY, LLP
PO BOX 426
COTTONWOOD, ID 83522DENIS B DUMAN
413 MAIN ST
COTTONWOOD, ID 83522**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Partner	Denis Duman	PO Box 431	Cottonwood	ID	83522
Partner	Terri Duman	PO Box 431	Cottonwood	ID	83522

5. Organized Under the Laws of:

IDAHO
J 1575

6.

Signature

Denis B. Duman

Date

1-21-09

Name (Typed or Printed)

Denis B. Duman

Title

Partner

Issued 01/05/2009

Do Not Tape or Staple

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