


No. W 29079	Due no later than March 31, 2006		2. Registered Agent and Office 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	Annual Report Form 1. Mailing Address - Correct in this box, if applicable SLKF, LLC PO BOX 915 LEWISTON, ID 83501		PAUL D SCHRETTE 1630 23RD AVE STE 301A LEWISTON, ID 83501 3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="0"> <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></td> <td>Paul D. Schrette</td> <td>1630 23rd #301A</td> <td>Lewiston</td> <td>ID</td> <td>83501</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>		Paul D. Schrette	1630 23rd #301A	Lewiston	ID	83501
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
	Paul D. Schrette	1630 23rd #301A	Lewiston	ID	83501											
5. Organized Under the Laws of: IDAHO W 29079		6. Signature  Date <u>2/01/2006</u> Name <small>(Typed or Printed)</small> _____ Title _____														

Issued 01/04/2006

Do Not Tape or Staple

200603001167