No. <b>C 129039</b>		[	Due no later than May 31, 2009	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form SHAUN NICHOLS						
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  NICHOLS LAWN CARE, INC.  SHAUN L NICHOLS  826 MEADOW VIEW DR  NAMPA ID 83651-2166  USA		NAMPA ID	826 MEADOW VIEW DR NAMPA ID 83651  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Regist				
4. Corporations: Enter Na	ames and Busin	ess Addresses o	of President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	SHAUN L NICHOLS		826 MEADOWVIEW DR.	NAMPA	ID	USA	83651-2166	
SECRETARY	SHAUN L NICHOLS SHAUN L NICHOLS		826 MEADOWVIEW DR.	NAMPA	ID	USA	83651-2166	
DIRECTOR			826 MEADOWVIEW DR.	NAMPA	ID	USA	83651-2166	
l .								
5. Organized Under the	Laws of:	6. Annual Rep	ort must be signed.*					
5. Organized Under the	Laws of:		ort must be signed.* Shaun Nichols		Date: 03/	/13/2009		
		Signature: S	3 30 3 300 K 30 30 <b>2</b> K 5		Date: 03/ Title: Pro	**************************************		