

No. <b>W 63384</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	Due no later than Jun 30, 2011 <b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> STEELHEAD TREE SERVICE, L.L.C. MITCHELL L WOLFE #12 BLUE CAMAS SALMON ID 83467 USA	2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) MITCHELL WOLFE #12 BLUE CAMAS SALMON ID 83467  3. <u>New</u> Registered Agent Signature.
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**4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**  

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
<input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)	MITCHELL L WOLFE	#12 BLUE CAMAS	SALMON	ID	USA	83467

5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 63384</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u>Mitchell L Wolfe</u></td> <td style="width: 30%;">Date: <u>4/30/11</u></td> </tr> <tr> <td>Name (type or print): <u>MITCHELL L WOLFE</u></td> <td>Title: <u>OWNER</u></td> </tr> </table>	Signature: <u>Mitchell L Wolfe</u>	Date: <u>4/30/11</u>	Name (type or print): <u>MITCHELL L WOLFE</u>	Title: <u>OWNER</u>
Signature: <u>Mitchell L Wolfe</u>	Date: <u>4/30/11</u>				
Name (type or print): <u>MITCHELL L WOLFE</u>	Title: <u>OWNER</u>				

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### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a new registered agent must sign in Block 3.