No. **W 9604**	**Due no later than Aug 31, 2009** **Annual Report Form**	2. Registered Agent and Address **(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**	**1. Mailing Address: Correct in this box if needed.** EXETER, LLC KELLY K O'NEIL CPA 1760 N MITCHELL ST BOISE ID 83704	KELLY K O'NEIL CPA 1760 N MITCHELL ST BOISE ID 83704 3. New 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	KELLY K O'NEIL CPA	1760 N MITCHELL ST	BOISE	ID	USA	83704

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 9604**	Signature: Kelly K O'Neil	Date: 06/29/2009
	Name (type or print): Kelly K O'Neil	Title: Managing Member

Processed 06/29/2009

* Electronically provided signatures are accepted as original signatures.