No. <b>W 45387</b>		Due no later than Dec 31, 2010		2	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  HARVESTORS LLC LORNA LOVELAND 4208 PLEASANT VIEW DR NAMPA ID 83686			LORNA LOVELAND 4208 PLEASANT VIEW DR NAMPA ID 83686  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar			at least one Member or Manager					
Office Held	Name	ries and Addresses of a	Street or PO Address		City	State	Country	Postal Code
MANAGER MANAGER	CRAIG LOVELAND LORNA LOVELAND		4208 PLEASANT VIEW DR 4208 PLEASANT VIEW DR		NAMPA NAMPA	ID ID	USA USA	83686 83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 45387		Signature: Lorna Loveland Name (type or print): Lorna Loveland			Date: 01/30/2011 Title: Manager			
Processed 01/30/2011 * Electronically provided signatures are accepted as original signatures.								