

No. W 11361

**Due no later than March 31, 2009
Annual Report Form**

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

**NO FILING FEE IF
RECEIVED BY DUE DATE**

1. Mailing Address - Correct in this box, if applicable

BOLEN FAMILY LLC
9190 AQUARIUS
BOISE, ID 83709

2. Registered Agent and Office NO PO BOX

GILBERT J BOLEN
9190 AQUARIUS
BOISE, ID 83709

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	GILBERT J. BOLEN	9190 AQUARIUS ST	Boise	ID	83709
MANAGER	MARLENE J. BOLEN	9190 AQUARIUS ST	Boise	ID	83709

5. Organized Under the Laws of:

IDAHO
W 11361

6.

Signature

Name (Typed or
Printed)

Gilbert J. Bolen

Date 02-26-09

Title MANAGER