No. W 25447	Due no later than August 31, 2007	2. Registered Agent and Office NO PO BOX
No. W 25441	Annual Report Form	AROL DEAN HOWES
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	□ □ 1. Mailing Address - Correct in this box: if applicable □□	15086 LAKE AVE NAMPA, ID 83651
	HOWES MANAGEMENT SERVICE (HMS) LLC	MAMPA, ID 63031
PO BOX 83720	15086 LAKE AVE	
BOISE, ID 83720-0080	NAMPA, ID 83651	3. New Registered Agent Signature
		3. How riogistored in
NO FILING FEE IF	No. of the second secon	
RECEIVED BY DUE DATE	1 A Liver of Mombars	4 (4)
 Limited Liability Comp 	anies: Enter Names and Addresses of Members.	7in
Managel Mille	1) Dance 15086 LAKEAVE. NAI	MIA 1 ISANO 83651
Member Karon	Street or P.O. Address PAN Hower 19086 LAKE AVE. NAME LAKE A	MAY LOAND 83891
Member Karon	K. Hower 15086 LAKE AVE. NAI	MA LOAND 83891
Member Karon	L. Hower 15086 LAKE AVE. NAI	MA LAMO 83891
Member Karon	L. Hower 15086 LAKE AVE. NAI	MA LAMO 83891
Member Karon	L. Hower 15086 LAKE AVE. NA	MA LAMO 83891
Member Karon	L. Hower 15086 LAKE AVE. NA	
		- h/u/e7
5. Organized Under the Laws of:	6. Signature	- 6/11/e7
	6. Signature Al DEAH HOL	- 6/11/e7
5. Organized Under the Laws of: IDAHO	6. MMX	Date 6/11/07