

No. J 1018

Due no later than July 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

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

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

GIFTWORKS L.L.P.
HC 01 BOX 363-C1
NAPLES, ID 83847SCOTT D LUCAS
HC 01 BOX 363-C1
NAPLES, ID 83847NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	SCOTT D LUCAS	HC 01 BOX 363-C1	NAPLES	ID	83847
	ANGELA LUCAS	HC 01 BOX 363-C1	NAPLES	ID	83847

5. Organized Under the Laws of:

IDAHO
J 1018

6.

Signature



Date

6/20/07

Name (Typed or Printed)

SCOTT LUCAS

Title

General Partner

Issued 05/01/2007

Do Not Tape or Staple

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