No. <b>W 49284</b>		Due no later than Apr 30, 2011	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CENTER FO TOM SIMM 2512 WAT	Annual Report Form  1. Mailing Address: Correct in this box if needed.  CENTER FOR LIMITED GOVERNMENT, LLC  TOM SIMMONS  2512 WATER WHEEL RD  EMMETT ID 83617		TOM SIMMONS 2512 WATER WHEEL RD EMMETT ID 83617  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	Name of a read Address	and a finish and Marshau as Marsaa					
Office Held Name	Names and Addre	esses of at least one Member or Manager.  Street or PO Address	City	State	Country	Postal Code	
MANAGER TOM SIMMONS		2512 WATERWHEEL ROAD	EMMETT	ID	USA	83617	
5. Organized Under the Laws of: 6. Annual Report		port must be signed.*					
ID	Signature:	Signature: Tom Simmons		Date: 04/04/2011			
W 49284	Name (typ	e or print): Tom Simmons		Title: Manager			
Processed 04/04/2011	* Electronically provided signatures are accepted as original signatures.						