

No. <b>W 23212</b>	<b>Due no later than March 31, 2006</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  FIVE FEATHERS, LLC 4233 N HAROLDSEN DR IDAHO FALLS, ID 83401		CLAYNE HANSON 4233 N HAROLDSEN DR IDAHO FALLS, ID 83401  3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Clayne A. Hanson</td> <td>679 N 3837 E</td> <td>Rigby</td> <td>ID</td> <td>83442</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Clayne A. Hanson	679 N 3837 E	Rigby	ID	83442
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Clayne A. Hanson	679 N 3837 E	Rigby	ID	83442											
5. Organized Under the Laws of:  IDAHO W 23212		6. Signature <u>Clayne A. Hanson</u> Date <u>1-17-06</u> Title _____														

Issued 01/04/2006

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or Staple

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