

No.

W 50526

Due no later than May 31, 2008

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

EMMETT FAMILY SERVICES, LLC

~~2007 S PLAZA STE 1~~

EMMETT, ID 83617

2007 E. Quail Run Rd #1

Emmett ID 83617

MICHAEL S LEE

~~2007 S PLAZA STE 1~~

EMMETT, ID 83617

2007 E Quail Run Rd #1

Emmett ID 83617

3. New Registered Agent Signature

NO FILING FEE IF

RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
Co-Owner	Michael S. Lee	711 1/2 E 3rd	Emmett	ID	83617
Co-Owner	Melissa M. Paller	711 E 3rd	Emmett	ID	83617

5. Organized Under the Laws of:

IDAHO
W 50526

6.

Signature



Date

3/10-08

Name (Typed or Printed)

Michael S. Lee

Title

Co-Owner