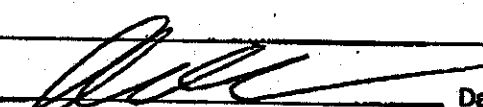


No. W 35439	Due no later than December 31, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX LILLAN GAECKE 226 TIMBERLINE RD HAILEY, ID 83333		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable GAECKES INSTITUTE, LLC LILLAN GAECKE PO BOX 5800 KETCHUM, ID 83340		3. New Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Managers.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member-Manager	Charles Gaecke	P.O. Box 5800	Ketchum	ID	83340
Member	Lillian Gaecke	P.O. Box 5800	Ketchum	ID	83340
Member	Jeff Gaecke	P.O. Box 5800	Ketchum	ID	83340
Member	Jennifer Gaecke	P.O. Box 5800	Ketchum	ID	83340
5. Organized Under the Laws of: IDAHO W 35439		6. Signature  Date <u>10-14-07</u> Name (Printed Name) <u>Charles Gaecke</u> Title <u>Member-Manager</u>			

Issued 10/01/2007

Do Not Tape or Staple

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