No. <b>W 40419</b>		Due no later than Jun 30, 2008	Registered Agent and Address (NO PO BOX)  DENNIS SECKEL     220 EASTLAND DR     TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  TEAM BOWLADROME, LLC DENNIS K SECKEL 467 WILDROSE LOOP TWIN FALLS ID 83301				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	SECKEL INC	467 WILDROSE LOOP	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Dennis K Seckel	Date: 04/10/2008			
W 40419		Name (type or print): Dennis K Seckel	Title: Member			
Processed 04/10/2008 * Electronically provided signatures are accepted as original signatures.						