No. W 1609		Due no later than Oct 31, 2011		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MCBRIDE RANCHES, LLC REED W MCBRIDE 2511 S OLD HWY 191 MALAD ID 83252		2511 S OLD MALAD ID	REED W MCBRIDE 2511 S OLD HWY 191 MALAD ID 83252 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200	es: Enter Nar	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
	REED W MCBRIDE SHIRLEY A MCBRIDE		2511 S OLD HWY 191 2511 S OLD HWY 191	MALAD MALAD	ID ID	USA USA	83252 83252	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 1609		Signature: Reed Mcbride			Date: 08/21/2011			
		Name (type o	r print): Reed Mcbride		Title: Manager			
Processed 08/21/2011		* Electronically provided signatures are accepted as original signatures.						