No. W 72150		Due no later than Mar 31, 2012		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		COLLEEN PELOQUIN N 34057 PRIEST RIVER DR SPIRIT LAKE ID 83869 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. A STEP BACK IN TIME PHOTOGRAPHY BY COLLEEN PELOQUIN LLC COLLEEN A PELOQUIN PO BOX 1135 SPIRIT LAKE ID 83869 USA						
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	COLLEEN A	PELOQUIN	N 34057 PRIEST RIVER DR		SPIRIT LAKE	ID	USA	83869
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 72150		Signature: Colleen A. Peloquin			Date: 01/09/2012			
		Name (type or print): Colleen A. Peloquin			Title: Manager			
Processed 01/09/2012 * Electronically provided signatures are accepted as original signatures.								