

No. W 37191		Due no later than Mar 31, 2009		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. CABIN CREEK, LLC CHAD MOFFAT 9175 W STATE ST BOISE ID 83714		CHAD MOFFAT 9177 W STATE ST BOISE ID 83714	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	CHAD MOFFAT	702 W. BEACON LIGHT	EAGLE	ID	USA 83616
5. Organized Under the Laws of: ID W 37191		6. Annual Report must be signed.* Signature: Chad Moffat Name (type or print): Chad Moffat Date: 01/26/2009 Title: Manager			
Processed 01/26/2009		* Electronically provided signatures are accepted as original signatures.			