

No. <b>W 31878</b>		Due no later than Jul 31, 2009		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b> <b>1. Mailing Address: Correct in this box if needed.</b> AA - ANSWERS AND ALTERNATIVES, L.L.C. ROBIN ARRIES 5433 N GOVERNMENT WAY #B COEUR D'ALENE ID 83815 USA		THOMAS R VAN FOSSEN 622 COLLEGE AVE ST MARIES ID 83861			
				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	THOMAS R VAN FOSSEN	PO BOX 533	ST MARIES	ID	USA	83861	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 31878</b>		Signature: Robin Arries				Date: 05/18/2009	
		Name (type or print): Robin Arries				Title: Office Manager	
Processed 05/18/2009		* Electronically provided signatures are accepted as original signatures.					