No. **W 20282**	**Due no later than Aug 31, 2006** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** ROCKY STORER R.V. STORAGE LLC TRISHA STORER 329 S WOODRUFF AVE IDAHO FALLS ID 83401	GALE T STORER 329 S WOODRUFF AVE IDAHO FALLS ID 83401 3. New 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	GALE T STORER	2918 N HOLMES	IDAHO FALLS	ID		83401
MANAGER	TRISHA STORER	2918 N HOLMES	IDAHO FALLS	ID	USA	83401

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
IDAHO **W 20282**	Signature: TRISHA STORER	Date: 06/21/2006
	Name (type or print): TRISHA STORER	Title: MANAGER

Processed 06/21/2006

* Electronically provided signatures are accepted as original signatures.