

| | | | | | |
|--|-------------------------|---|---------|--|---------------------|
| No. W 27506 | | Due no later than Dec 31, 2006 | | 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 | | MAX L WADE 375 S 5000 W REXBURG ID 83440 | |
| | | 1. Mailing Address: Correct in this box if needed. WADE ENTERPRISES, LLC MAX L WADE 375 S 5000 W REXBURG ID 83440 | | 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 |
| MEMBER | MAX L WADE | 375 S 5000 W | REXBURG | ID | 83440 |
| MEMBER | DEANNA GRACE RICKS WADE | 375 S 5000 W | REXBURG | ID | 83440 |
| 5. Organized Under the Laws of: IDAHO W 27506 | | 6. Annual Report must be signed.* Signature: MAX L. WADE Name (type or print): MAX L. WADE Date: 10/19/2006 Title: MEMBER | | | |
| Processed 10/19/2006 | | * Electronically provided signatures are accepted as original signatures. | | | |