

No. W 66313		Due no later than Sep 30, 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. NURSERYMAN LLC KEVIN GALLIVAN 673 W WILLOWBROOK DR MERIDIAN ID 83646		KEVIN GALLIVAN 673 W WILLOWBROOK DR MERIDIAN ID 83646			
				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	KEVIN GALLIVAN	673 W WILLOWBROOK DR	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of: ID W 66313		6. Annual Report must be signed.* Signature: Kevin Gallivan Name (type or print): Kevin Gallivan Date: 10/13/2009 Title: Manager					
Processed 10/13/2009		* Electronically provided signatures are accepted as original signatures.					