

No. W 4840

Due no later than October 31, 2007

Annual Report Form

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

CME PROTOCOL LIMITED LIABILITY COMP
DWIGHT G ROMRIELL
13840 N MOONGLOW
POCATELLO, ID 83202

2. Registered Agent and Office NO PO BOX

DWIGHT G ROMRIELL
13840 N MOONGLOW
POCATELLO, ID 83202

NO FILING FEE IF

RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Dwight Romriell	13840 N. Moonglow	Pocatello	Idaho	83202
Manager	David C Romriell	13840 N. Moonglow	Pocatello	Idaho	83202

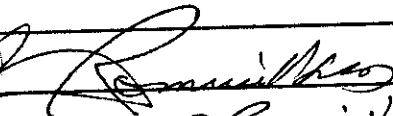
5. Organized Under the Laws of:

IDAHO
W 4840

6.

Signature

Name (Typed or Printed)



Dwight G Romriell

Date

8-18-2007

Title

Manager

Issued 08/02/2007

Do Not Tape or Staple

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