

No. W 5590

Due no later than February 29, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

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

MARY L MORRIS, CPA, PLLC  
MARY L MORRIS  
PO BOX 2199  
POST FALLS, ID 83877-2199MARY L MORRIS  
1120 N SPOKANE ST  
POST FALLS, ID 83854-7656NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

Office heldNameStreet or P.O. AddressCityStateZip

MANAGER M L MORRIS PO BOX 2199 POST FALLS ID 83877 2199

5. Organized Under the Laws of:

IDAHO  
W 5590

6.

Signature

Mary L Morris

Date

12/10/07

Name (Typed or Printed)

MARY L MORRIS

Title

MANAGER

Issued 12/03/2007

Do Not Tape or Staple

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