No. **W 66787**	**Due no later than Sep 30, 2008** **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.** COPPER LAKE, LLC MATTHEW DROWN 2150 W PACIFIC RIDGE EAGLE ID 83616	MATTHEW DROWN 2150 W PACIFIC RIDGE EAGLE ID 83616 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	MATTHEW DROWN	2150 W PACIFIC RIDGE	EAGLE	ID	USA	83616

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 66787**	Signature: Matthew Drown Name (type or print): Matthew Drown	Date: 10/26/2008 Title: Manager

Processed 10/26/2008 * Electronically provided signatures are accepted as original signatures.