

<b>No.</b> W 28301	<b>Due no later than January 31, 2009</b> <b>Annual Report Form</b>	<b>2. Registered Agent and Office NO PO BOX</b>
<b>Return to:</b> SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  VIDEO CHRONICLES, LLC 3277 W 3400 N MOORE, ID 83255	CHERI PEARSON 3277 W 3400 N MOORE, ID 83255  <b>3. <u>New</u> Registered Agent Signature</b>

**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	Cheri Pearson	<del>above</del> 3277 W. 3400 N.	MOORE	ID	83255
Asst Manager	Kevin Pearson	<del>same as above</del> 3277 W. 3400 N.	MOORE,	ID	83255

<b>5. Organized Under the Laws of:</b>  IDAHO W 28301	<b>6.</b> Signature <u>Cheri Pearson</u> Date <u>11/29/08</u> Name <small>(Typed or Printed)</small> <u>Cheri Pearson</u> Title <u>Managing Owner</u>
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