

No. **W 16792**

Due no later than October 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

CHRIS A ANDERSON
10290 HWY 12
OROFINO, ID 83544

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

BUNGALOW OUTFITTER, LLC
CHRIS ANDERSON
PO BOX 1835
OROFINO, ID 83544

3. New Registered Agent Signature

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

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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>
Member	Chris A. Anderson	3044 Lower Ford's Cr Rd	Orofino	ID	83544
Member	Adelia Sue Anderson	" " " " "	"	"	"

5. Organized Under the Laws of:
IDAHO
W 16792

6.
Signature Adelia Sue Anderson **Date** 8-18-08
Name (Type or Printed) Adelia Sue Anderson **Title** 8-18-08

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