

No. W 49332	Due no later than April 30, 2009 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  NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable  BROKEN CLOVER TRAINING FACILITY FOR REBECCA M PAYNE 12726 N LARAMIE LN POCATELLO, ID 83202		REBECCA M PAYNE 12726 N LARAMIE LN POCATELLO, ID 83202  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/owner	Rebecca Payne	5163 Jake	chubbuck, Idaho		83202
5. Organized Under the Laws of: IDAHO W 49332		6. Signature <u>Rebecca Payne</u>		Date <u>6-30-09</u>	
		Name <small>(Typed or Printed)</small> <u>Rebecca Payne</u>		Title <u>manager/owner</u>	

Issued 02/02/2009

**Do Not Tape or Staple**

200904007466