No. <b>W 58062</b> Return to:		Due no later than Jan 31, 2009 Annual Report Form	2. Registered Agent and Address (NO PO BOX)  GERALD MARTENS 621 N COLLEGE STE 100  TWIN FALLS ID 83301  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CHAMP, LLC GERALD MARTENS 621 N COLLEGE RD STE 100 TWIN FALLS ID 83301					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compa	anies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER TENSCO INC		621 N COLLEGE RD STE 100	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 58062		Signature: Gerald Martens	Date: 11/13/2008				
		Name (type or print): Gerald Martens	Title: Manager				
Processed 11/13/2008	* Electronically provided signatures are accepted as original signatures.						