No. W 60719	Due no later than March 31, 2008	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	Annual Report Form 1. Mailing Address - Correct in this box. if applicable LGL, L.L.C. POBOX591 TWIN PALLS, ID 83303 224 Trailwood 100 TWIN FAILS, ID 83301	ANDREW C LYDA 224 TRAILWOOD AVE TWIN FALLS, ID 83301 3. New Registered Agent Signature
	es: Enter Names and Addresses of Managers.	
med bald Mana	Street or P.O. Address City	y <u>State</u> <u>Zip</u>
Office held Name	0.000,0710.100.000	
1 h a : 0 a a a / A \ \	and the second star T	Dile ID 92201
Manager Andrewc	. Lyde 224 Mailwood the TV	un Falls 1D 93301
Manager Andrewc	. Lydn 224 Tailwood the To	wh Falls ID 9330)
Manager Andrewc	. Lydn 224 Mailwood the To	wh Falls ID 83301
Manager Andrewc	. Lydn 224 Mailwood the To	wh Falls ID 93301
Manager Andrewc	. Lydn 224 Mailwood the To	un Falls ID 93301
Manager Andrewc	. Lydn 224 Mailwood the To	wh Falls ID 93301
Manager Andrewc	. Lydn 224 Mailwood the To	wh Falls ID 93301
Manager Andrewc	. Lydn 224 Mailwood the To	un Falls ID 93301
5. Organized Under the Laws of:	6.	
i, Organized Under the Laws of: IDAHO	6. Signature	· ·
5. Organized Under the Laws of:	6.	Date 5.5.03 Title Manager