

<b>No. W 47822</b>  Return to: 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>Due no later than February 29, 2008 Annual Report Form</b>  1. Mailing Address - Correct in this box, if applicable  CATTLE COUNTRY STEAKHOUSE, LLC TONYA L ZOLLINGER 420 NORTH MAIN MALTA, ID 83342	2. Registered Agent and Office <b>NO PO BOX</b>  TONYA L ZOLLINGER 420 NORTH MAIN MALTA, ID 83342  3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Manager</td> <td style="vertical-align: top;">Tonya Zollinger <del>by Black</del></td> <td style="vertical-align: top;">420 N Main</td> <td style="vertical-align: top;">Malta</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83342</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Tonya Zollinger <del>by Black</del>	420 N Main	Malta	ID	83342
Office held	Name	Street or P.O. Address	City	State	Zip									
Manager	Tonya Zollinger <del>by Black</del>	420 N Main	Malta	ID	83342									
5. Organized Under the Laws of:  IDAHO W 47822	6. Signature <u>Tonya Zollinger</u> Name (Typed or Printed) <u>Tonya Zollinger</u> Date <u>12/9/07</u> Title <u>owner</u>													

**Staple**

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