

No. W 78569	Due no later than Oct 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		SCOTT LEE 5605 N MORPHEUS PL MERIDIAN ID 83646			
	11045 W. HAZELWOOD DR. LLC SCOTT LEE 5605 N MORPHEUS PL MERIDIAN ID 83646		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	SCOTT H LEE	5605 N. MORPHEUS PL	MERIDIAN	ID	USA	83646
5. Organized Under the Laws of: ID W 78569		6. Annual Report must be signed.* Signature: Scott lee Name (type or print): Scott lee Date: 09/15/2009 Title: President				
Processed 09/15/2009		* Electronically provided signatures are accepted as original signatures.				