

No. W 16991		Due no later than Nov 30, 2006		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. KLS&M LLC LINDA S WILLS 2011 OAKWOOD DR TWIN FALLS ID 83301		LINDA S WILLS 2011 OAKWOOD DR TWIN FALLS ID 83301	
				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
MEMBER	LINDA S WILLS	2011 OAKWOOD DR	TWIN FALLS	ID	83301
5. Organized Under the Laws of: IDAHO W 16991		6. Annual Report must be signed.* Signature: Linda Wills Name (type or print): Linda Wills Date: 09/10/2006 Title: General Partner			
Processed 09/10/2006		* Electronically provided signatures are accepted as original signatures.			