

No. W 57736

**Due no later than January 31, 2009
Annual Report Form**

2. Registered Agent and Office NO PO BO

Return to:
**SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080**

1. Mailing Address - Correct in this box, if applicable

**LMS MANAGEMENT LLC
905 BRYDEN AVE
LEWISTON, ID 83501**

**WILBUR G CHAPMAN
905 BRYDEN AVE
LEWISTON, ID 83501**

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Owner	Wilbur Chapman	905 Bryden Ave	Lewiston	Id	83501

5. Organized Under the Laws of:

**IDAHO
W 57736**

6.

Signature Wilbur Chapman Date 11-24-08

Name (Typed or Printed) Wilbur Chapman Title Owner