	Annual Report Form 1. Mailing Address - Correct in this box, if applicable TARY OF STATE ST JEFFERSON 2AW, LLC RUSCITTO/LATHAM/BLANTON PO BOX 419	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		NICHOLAS LATHAM 771 WASHINGTON AVE N
		KETCHUM, ID 83340 3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Limited Liability Compa Office held Name	nies: Enter Names and Addresses of Members. Street or P.O. Address	City State Zip
MANAGER NICHOLA	S JON LATHAM P.O. BOX 419 SUN	VALLEY ID 83353
i		
5. Organized Under the Laws of:	6. Signature //ww/as Jon	- Mu Date 04/11/05
5. Organized Under the Laws of: IDAHO W 2410	6. Signature / / / / / / / / / / / / / / / / / / /	