

| | | | | | |
|--|---------------|--|----------|---|---------------------|
| No. W 43516 | | Due no later than Oct 31, 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. NORTHWEST CUSTOM HOMES, LLC TIM D PALMER 2257 N SHARON DR MERIDIAN ID 83646 | | TIM D PALMER 4315 N SHARON DR MERIDIAN ID 83642 | |
| | | | | 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 | TIM D PALMER | 2257 N SHARON DR | MERIDIAN | ID | 83646 |
| MEMBER | NEIL J HAMANN | 11947 W DREAMCATCHER ST | BOISE | ID | 83714 |
| 5. Organized Under the Laws of: IDAHO W 43516 | | 6. Annual Report must be signed.* Signature: TIM D PALMER Name (type or print): TIM D PALMER Date: 09/06/2006 Title: MEMBER | | | |
| Processed 09/06/2006 | | * Electronically provided signatures are accepted as original signatures. | | | |