No. W 50411		Due no later than May 31, 2007		[2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. T L P, LLC ILENE JOHSON 1010 N COLE RD BOISE ID 83704		_	ILENE JOHNSON 7147 CASCADE DR BOISE ID 83704 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of a	t least one Member or Manager					
Office Held	Name	Ties and Addresses of a	Street or PO Address		City	State	Country	Postal Code
MEMBER ILENE JOHNS		SON	7147 CASCADE DR		BOISE	ID		83704
5. Organized Under the Laws of: IDAHO W 50411		6. Annual Report must be signed.* Signature: Cheyl Parker And Admin. Asst. Date: 05/01/2007 Name (type or print): Cheyl Parker And Admin. Asst. Title: Cheryl Parker And Admin. Asst.						
Processed 05/01/2007		* Electronically provided signatures are accepted as original signatures.						