


| | | |
|---|--|--|
| No. W 37353 | Due no later than March 31, 2009 | 2. Registered Agent and Office NO PO BOX |
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | Annual Report Form | MICHAEL MCCALL |
| | 1. Mailing Address - Correct in this box, if applicable COFFEE BREAK, LLC PO BOX 610 PAUL, ID 83347 | 185 NORTH 500 WEST RUPERT, ID 83350 3. <u>New</u> Registered Agent Signature |

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

| Office held | Name | Street or P.O. Address | City | State | Zip |
|-------------|-----------------------|------------------------|--------|-------|-------|
| | member Michael McCall | - 185 N 500W | Rupert | Id | 83350 |
| | member Susan McCall | " | " | " | " |
| | member Justin McCall | 355W 300N | " | " | " |

| | |
|---|---|
| 5. Organized Under the Laws of: IDAHO W 37353 | 6. Signature <u></u> Date <u>2/22/09</u> Name (Typed or Printed) <u>Susan McCall</u> Title <u>Member</u> |
|---|---|

Issued 01/05/2009

Do Not Tape or Staple

200903007791