No. <b>W 43708</b>		Due no later than Oct 31, 2009		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form  1. Mailing Address: Correct in this box if needed.  CRUISERS II LLC LARRY M HERBERHOLZ 1340 GLOVER LN POST FALLS ID 83854		1240 CLOVED	LARRY HERBERHOLZ 1.340 GLOVER LN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				POST FALLS	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	oanies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	LARRY HERI	BERHOLZ	1340 GLOVER LN	POST FALLS	WA	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
WA W 43708		Signature: La		Date: 08/19/2009				
		Name (type or		Title: Member				
Processed 08/19/2009 * Electronically provided signatures are accepted as original signatures.								