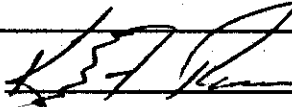


No. W 23783	Due no later than April 30, 2008		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form 1. Mailing Address - Correct in this box, if applicable		KEITH RASMUSSEN 1396 SATTERFIELD DR POCATELLO, ID 83201													
	GABLES MANAGEMENT, LLC PO BOX 656 POCATELLO, ID 83204		3. New Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Owner/manager</td> <td>Keith Rasmussen</td> <td>1396 Satterfield</td> <td>Pocatello</td> <td>Id</td> <td>83201</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Owner/manager	Keith Rasmussen	1396 Satterfield	Pocatello	Id	83201
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Owner/manager	Keith Rasmussen	1396 Satterfield	Pocatello	Id	83201											
5. Organized Under the Laws of: IDAHO W 23783		6. Signature  Name Typed or Printed Keith Rasmussen Date 2/14/08 Title Owner														

Issued 02/01/2008

Do Not Tape or Staple

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