No. W 83379		Due no later than Apr 30, 2010			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JOEL PHILLIPS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CENTERPOINT CAPITAL ADVISORS LLC JOEL D PHILLIPS PO BOX 2986 POCATELLO ID 83206			538 C PHEASANT RIDGE DR CHUBBUCK ID 83202 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	ipanies: Enter Nai	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER JOEL D PHILLIPS		LLIPS	PO BOX 2986		POCATELLO	ID	USA	83206
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 83379		Signature: Joel Phillips			Date: 03/07/2010			
		Name (type or print): Joel Phillips			Title: Member			
Processed 03/07/2010 * Electronically provided signatures are accepted as original signatures.								