

No. <b>W 49499</b>		<b>Due no later than Apr 30, 2011</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		TIMOTHY D PALMER 2736 RHYOLITE DR BOISE ID 83712			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		EYE GOTCHA COVERED PROPERTIES, LLC TIMOTHY D PALMER 2736 RHYOLITE BOISE ID 83712					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	TIMOTHY D PALMER	2736 RHYOLITE DR	BOISE	ID	USA	83712	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 49499</b>		Signature: Timothy Palmer				Date: 02/12/2011	
		Name (type or print): Timothy Palmer				Title: Manager	
Processed 02/12/2011		* Electronically provided signatures are accepted as original signatures.					