No. W 17206	Due no later than Nov 30, 2006		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. PONS AMADOR LLC 1401 SHORELINE DR SUITE 2 BOISE ID 83702	1401 SHOREL SUITE 2 BOISE ID 8:	CORPORATION SERVICE COMPANY 1401 SHORELINE DR SUITE 2 BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER CMA CAPITA	AL MANAGEMENT INC 1440 CHAPIN AVE SUITE 310	BURLINGAME	CA		94010	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
IDAHO	Signature: Neal D. Crispin, President Date: 09/19/2006					
W 17206	Name (type or print): Neal D. Crispin, President	Title: Ne	Title: Neal D. Crispin, President Of			
Processed 09/19/2006	* Electronically provided signatures are accepted as original signatures.					