

No. W 50607	Due no later than May 31, 2008 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. ORCHARD DRIVE, LLC JIM PRIMM 1542 ADDISON AVE E TWIN FALLS ID 83301		JAMES R PRIMM 1542 ADDISON AVE E TWIN FALLS ID 83301			
			3. <u>New</u> Registered Agent Signature:*			
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	ST GEORGE FLP	4535 W SAHARA AVE STE 204	LAS VEGAS	NV	USA	89102
5. Organized Under the Laws of: ID W 50607	6. Annual Report must be signed.* Signature: St George Flp Name (type or print): St George Flp		Date: 05/22/2008 Title: Manager			
Processed 05/22/2008		* Electronically provided signatures are accepted as original signatures.				