

No. W 11203

Due no later than March 31, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

INTERMOUNTAIN NUTRITIONAL SERVICES,  
ROBERT G MICKELSEN  
191 N 3990 E  
RIGBY, ID 83442

ROBERT G MICKELSEN  
191 N 3990 E  
RIGBY, ID 83442

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Robert Mickelsen	191 N. 3990 E.	Rigby	ID	83442
Manager	Holly Mickelsen	191 N. 3990 E.	Rigby	ID	83442

5. Organized Under the Laws of:

IDAHO  
W 11203

6.

Signature

Date

2-1-08

Name (Typed or Printed)

Holly Mickelsen

Title

Manager

Issued 01/02/2008

Do Not Tape or Staple

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