

No. <b>W 6685</b>		Due no later than Aug 31, 2009 <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b> ACCIPITER, LLC DENNIS D BURTS P O BOX 249 DONNELLY ID 83615		DENNIS D BURTS 13330 VILI RD DONNELLY ID 83615	
				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	DENNIS D BURTS	P O BOX 249	DONNELLY	ID	USA 83615
5. Organized Under the Laws of:  <b>ID W 6685</b>		6. Annual Report must be signed.* Signature: Dennis D Burts Name (type or print): Dennis D Burts			
		Date: 06/11/2009 Title: Manager			
Processed 06/11/2009		* Electronically provided signatures are accepted as original signatures.			