


No. <b>W 30794</b>	Due no later than May 31, 2010 <b>Annual Report Form</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) <b>KEITH OLSTROM</b> <b>3269 MAZE AVE</b> <b>BOISE ID 83706</b>		
Return to: <b>SECRETARY OF STATE</b> <b>450 N 4th STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address: Correct in this box if needed. <b>VANGUARD PROTECTION GROUP LLC</b>  <b>3269 MAZE AVE</b> <b>BOISE ID 83706</b>		3. New Registered Agent Signature.		
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.					
Office Held	Name	Street or PO Address	City	State Country	Postal Code
MANAGER	KEITH OLSTROM	PO BOX 1662	BOISE	ID ADA	83701
5. Organized Under the Laws of:					6.
<b>IDAHO</b> <b>W 30794</b>		Signature: 		Date: <b>06/07/10</b>	
		Name (type or print): <b>KEITH OLSTROM</b>		Title: <b>MANAGER</b>	
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