

No. W 7618		Due no later than Dec 31, 2009		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		Annual Report Form		CHRIS A ANDERSON 1215 SHRIVER RD OROFINO ID 83544		
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*		
		FORDS CREEK ELECTRIC & PUMP, LLC CHRIS A ANDERSON PO BOX 2196 OROFINO ID 83544				
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
MEMBER	NIKKI L ANDERSON	P. O. BOX 24	OROFINO	ID	USA	83544
MEMBER	JASON M ANDERSON	P. O. BOX 24	OROFINO	ID	USA	83544
MANAGER	CHRIS A ANDERSON	PO BOX 2969	OROFINO	ID	USA	83544
MEMBER	ADELIA SUE ANDERSON	PO BOX 2969	OROFINO	ID	USA	83544
5. Organized Under the Laws of: ID W 7618		6. Annual Report must be signed.* Signature: Adelia Sue Anderson Name (type or print): Adelia Sue Anderson		Date: 12/18/2009 Title: Member		
Processed 12/18/2009		* Electronically provided signatures are accepted as original signatures.				