No. <b>W 5213</b>		Due no later than Dec 30, 2005		2. Registered Age	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  1. Mailing Address: Correct in this box if needed.  MILLAR FAMILY L.L.C.  DARREN HAMPTON  PO BOX 413  SHELLEY ID 83274 0000		DARREN HAMPTON 860 E 1300 N SHELLEY ID 83274 0000  3. New Registered Agent Signature:*				
		nes and Addresses of at	least one Member or Manager.					
	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	GALE HAMPTON		P.O. BOX 406	SHELLEY	ID		83274	
			P.O. BOX 406	SHELLEY	ID		83274	
MANAGER JEANNE STON			P.O. BOX 424	MT PLEASANT	UT		84647	
			P.O. BOX 424	MT PLEASANT	UT		84647	
MEMBER ARVIL MILLAR IRREVOCABLE TRUST PO BOX 424 MT PLEASANT UT 8464							84647	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
IDAHO W 5213		Signature: Darren Ha		Date: 10/30/2005				
		Name (type or print): Darren Hampton			Title: Manager			
Processed 10/30/2005 * Electronically provided signatures are accepted as original signatures.								