

No. W 40033

Due no later than June 30, 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

CT SALES, LLC
7259 CASCADE DR
BOISE, ID 83704

HAROLD E THOMAS
7259 CASCADE DR
BOISE, ID 83704

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Harold E. Thomas	7259 Cascade Dr.	Boise,	ID	83704

5. Organized Under the Laws of:
IDAHO
W 40033

6.

Signature

Harold E. Thomas

Date

4/23/08

Name (Typed or Printed)

HAROLD E. THOMAS

Title

Manager

Issued 04/01/2008

Do Not Tape or Staple

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