

No. W 13863	Due no later than December 31, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		JOHN R JACKSON 856 F STREET LEWISTON, ID 83501 3. <u>New</u> Registered Agent Signature
	BOB JACKSON BODY REPAIR, L.L.C. JOHN R JACKSON 856 F STREET LEWISTON, ID 83501		

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>
member	John R. Jackson	856 F St.	Lewiston	ID	83501

5. Organized Under the Laws of: IDAHO W 13863	6. Signature <u><i>John R. Jackson</i></u> Date <u>7/2/9/08</u> Name (Typed or Printed) <u>JOHN R. JACKSON</u> Title <u>OWNER</u>
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