No. <b>W 74153</b>		Due no later than May 31, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LT PROPE DEVOY S	Annual Report Form  1. Mailing Address: Correct in this box if needed.  LT PROPERTY MANAGEMENT LLC  DEVOY S GOFF  1772 TOUCH DR  INKOM ID 83245		DEVOY S GOFF 1772 TOUCH DR INKOM ID 83245  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Er	ter Names and Addr	resses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
1.1	YS GOFF EE L GOFF	1772 TOUCH DR 1772 TOUCH DR	INKOM INKOM	ID ID	USA USA	83245 83245	
5. Organized Under the Laws of:	6. Annual Re	6. Annual Report must be signed.*					
ID	Signature	Signature: DeVoy Goff Date: 06/27/2010					
W 74153	Name (ty	Name (type or print): DeVoy Goff Title: Member					
Processed 06/27/2010	* Electronica	* Electronically provided signatures are accepted as original signatures.					