Due no later than Jun 30, 2012	2. Registered Agent and Office
Annual Report Form	(NOT A P.O. BOX)
1. Mailing Address: Correct in this box if needed. PETERSON CABINETS AND TRIM LLC MICHAEL B PETERSON 132 N 4020 E RIGBY ID 83442	MICHAEL B PETERSON 132 N 4020 E RIGBY ID 83442
	3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Manager or Member Name Street or PO Address City State Country Postal Code Manager Member Mike Peterson 132 N 4020 E Righty Id VSA 83442 Manager Member Pouda Peterson 132 N 4020 E Righty Id 8UA 83442 Manager Member Member Member Member	
No of: 6. Signature: Name (type or print): Ronda Petekson	Date:
	1. Mailing Address: Correct in this box if needed. PETERSON CABINETS AND TRIM LLC MICHAEL B PETERSON 132 N 4020 E RIGBY ID 83442 Companies: Enter Names and Addresses of Manager. Name Street or PO Address City Mike Peterson 132 N 4020 E Rig Danda Reterson 132 N 4020 E Rig Name Reterson 132 N 4020 E Rig Name (type or print):

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