No. <b>W 66293</b>		Due no later than Sep 30, 2009			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  SORENSEN APARTMENTS, LLC MURRAY JIM SORENSEN PO BOX 1047 BLACKFOOT ID 83221			MURRAY JIM SORENSEN 285 NW MAIN BLACKFOOT ID 83221  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses	of at least one Member or Manager					
200 20 20	vame	nes and Addresses	Street or PO Address		City	State	Country	Postal Code
MANAGER M	MURRAY JIM	1 SORENSEN	PO BOX 1047		BLACKFOOT	ID	USA	83221
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 66293		Signature: Murray Jim Sorensen Date: 08/1					: 08/12/2009	)
		Name (type or print): Murray Jim Sorensen			Title: Manager			
Processed 08/12/2009 * Electronically provided signatures are accepted as original signatures.								