No. <b>W 6125</b>		Due no later than May 31, 2006			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JOHN C HAIGHT				
SECRETARY OF STAT	_	1. Mailing Address: Correct in this box if needed.			2091 WHITECLOUD CIR TWIN FALLS ID 83301			
PO BOX 83720 BOISE, ID 83720-0080		BERGER & HAIGHT ENTERPRISES LLC JOHN C HAIGHT 2091 WHITECLOUD CIR						
		TWIN FALLS ID 83301			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER JOHN C HAI		IGHT	2091 WHITECLOUD CIR		TWIN FALLS	ID		83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
IDA HO		Signature: John C. Haight			Date: 04/03/2006			
W 6125		Name (type or print): John C. Haight			Title: Manager			
* Electronically provided signatures are accepted as original signatures.								