No. W 45275	Due no later than Dec 31, 2007		2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual F	Annual Report Form		GERALD MARTENS 621 N COLEGE STE 100 TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Con SOUTH JEROME ENTERPRI GERALD L MARTENS 621 N COLLEGE RD STE 10 TWIN FALLS ID 83301	MARTENS LEGE RD STE 100					
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	Stre	eet or PO Address	City	State	Country	Postal Code	
MANAGER GERALD MARTENS MANAGER LARRY TUCKER		N COLLEGE RD STE 100 BOX 3037	TWIN FALLS HAILEY	ID ID	USA USA	83301 83333	
5. Organized Under the Laws of:	6. Annual Report must be sig	port must be signed.*					
ID	Signature: Gerald Martens	Signature: Gerald Martens		Date: 10/10/2007			
W 45275	Name (type or print): Gerald Martens		Title: Manager				
Processed 10/10/2007	* Electronically provided signatures are accepted as original signatures.						