

No. W 62008

Due no later than April 30, 2009

Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

CAMP SHERMAN, LLC
3355 FARM TO MARKET RD
MIDVALE, ID 83645

TOMMY B WAKEFIELD
3355 FARM TO MARKET RD
MIDVALE, ID 83645

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Co manager	Tommy B. Wakefield	3355 Farm to Market Rd.	Midvale	ID.	83645
Co manager	Doris G. Wakefield	3355 Farm to Market Rd.	Midvale	ID.	83645

5. Organized Under the Laws of:

IDAHO
W 62008

6.

Signature



Date

2-26-09

Name (Typed or Printed)

Tommy B. Wakefield

Title

Co Manager

Issued 02/02/2009

Do Not Tape or Staple

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