No. W 29902	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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box. if applicable MLA ENTERPRISES LIMITED LIABILITY C PO BOX 49 MCCALL, ID 83638	KATHLEEN E MALONE 2141 EASTSIDE DR MCCALL, ID 83638 3. New Registered Agent Signature
4. Limited Liability Companies: Enter Names and Addresses of Managers.		
office hold Name PRES. MATTHE VP Leah An manage Kathle	Street or P.O. Address TW ANDERSON PO BOX 49 MC UNE ANDERSON PO BOX 49 N een E. Malone 90 Box 49 N	CAU ID 83638 Iclau ID 83638 McCAU ID 83638
5. Organized Under the Laws of: IDAHO W 29902	6. Signature Kathleen & Make Name (Typed or Kathleen E. MA	LONE THE Manager
Issued 02/02/2009	Do Not Tape or Staple	200904006537