

No. <b>W 4195</b>		<b>Due no later than Jun 30, 2009</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  NORTHWEST TRADERS LLC KIT CAVE PO BOX 879 DONNELLY ID 83615		KIT CAVE 13427 NORWOOD DONNELLY ID 83638			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name CHRISTOPHER CAVE	Street or PO Address 13249 KOKANEE DRIVE PO BOX 879		City DONNELLY	State ID	Country USA	Postal Code 83615
5. Organized Under the Laws of:  <b>ID</b> <b>W 4195</b>		6. Annual Report must be signed.*  Signature: Christopher Cave Name (type or print): Christopher Cave  Date: 04/15/2009 Title: Manager					
Processed 04/15/2009 * Electronically provided signatures are accepted as original signatures.							