No. <b>W 36291</b>	Due n	Due no later than Jan 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:	An	Annual Report Form		RICHARD ALDEN DAMARJIAN			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			868 N YELLOWSTONE HWY			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	PARADISE NURSERY & POND CENTER, LLC RICHARD ALDEN DAMARJIAN 868 N YELLOWSTONE HWY REXBURG ID 83440			REXBURG ID 83440  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addresses of	f at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER BRACKEN	EMBER BRACKEN ADAM ECKERSELL		RIGBY	ID	USA	83442	
MEMBER RICHARD	ALDEN DAMARJIAN	372 N 3RD W	RIGBY	ID	USA	83442	
MEMBER LAINE AD	AM ECKERSELL	101 W MAIN ST	RIGBY	ID	USA	83442	
5. Organized Under the Laws of: 6. Annual Report mu		ust be signed.*					
<b>ID</b> Signature: E		cken Eckersell		Date: (	Date: 02/09/2011		
W 36291	Name (type or pri	Name (type or print): Bracken Eckersell		Title: Member			
Processed 02/09/2011	* Electronically provided signatures are accepted as original signatures.						