No. W 25491		Due no later than Aug 31, 2009		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JERRE L EVANS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. EVANS RANGE RECLAMATION, LLC JERRE EVANS 5050 BAILEY RD ARBON ID 83212		ARBON ID	5050 BAILEY RD ARBON ID 83212 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Con	npanies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JERRE L EVANS		5050 BAILEY RD	ARBON	ID	USA	83212	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jerre Evans			Date: 06/11/2009			
W 25491		Name (type or p		Title: Owner				
Processed 06/11/2009 * Electronically provided signatures are accepted as original signatures.								