No. <b>W 10995</b>		Due no later than Feb 29, 2012		2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.		GARRY KILLPACK 1140 N 1290 E				
		KILLPACK LAND COMPANY, LLC GARRY KILLPACK 1140 N 1290 E SHELLEY ID 83274 USA		<b>46</b>	SHELLEY ID 83274			
					3. New Registered Agent Signature:*			
4. Limited Liability Compa	nies: Enter Nar	nes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	GARRY KILLPACK		1140 N 1290 E		SHELLEY	ID	USA	83274
MANAGER	TODD KILLPA	ACK	541 N 500 E		FIRTH	ID	USA	83236
MANAGER	DIANE KILLP	ACK	1140 N 1290 E		SHELLEY	ID	USA	83274
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 10995		Signature: Garry Killpack		Date: 01/03/2012				
		Name (type or print): Garry Killpack			Title: Manager			
Processed 01/03/2012		* Electronically provided signatures are accepted as original signatures.						