No. W 33057 Return to:		Due no later than Sep 30, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX) KITCHENER E HEAD 1850 SKUNK SPRINGS LANE VICTOR ID 83455 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address Skunk Springs Li KITCHENER E HE PO BOX 140	1. Mailing Address: Correct in this box if needed. SKUNK SPRINGS LLC KITCHENER E HEAD PO BOX 140 VICTOR ID 83455					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addresses of	at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER KITCHENI MANAGER SONJA C	er e head Head	1850 SKUNK SPRINGS LANE 1850 SKUNK SPRINGS LANE	VICTOR VICTOR	ID ID	USA USA	83455 83455	
5. Organized Under the Laws of: 6. Annual Repor		st be signed.*					
ъ	Signature: Kitcher	nature: Kitchener E Head		Date: 07/16/2012			
W 33057	Name (type or pri	Name (type or print): Kitchener E Head		Title: Manager			
Processed 07/16/2012	* Electronically provid	* Electronically provided signatures are accepted as original signatures.					