

No. W 25447	Due no later than Aug 31, 2009 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. HOWES MANAGEMENT SERVICE (HMS) LLC AROL D. HOWES 15086 LAKE AVE NAMPA ID 83651		AROL DEAN HOWES 15086 LAKE AVE NAMPA ID 83651			
			3. <u>New</u> Registered Agent Signature:*			
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
MEMBER	AROL DEAN HOWES	15086 LAKE AVE	NAMPA	ID	USA	83651
MEMBER	KAREN KAY HOWES	15086 LAKE AVE	NAMPA	ID	USA	83651
5. Organized Under the Laws of: ID W 25447	6. Annual Report must be signed.* Signature: Arol Dean Howes Name (type or print): Arol Dean Howes		Date: 06/09/2009 Title: Member			
Processed 06/09/2009		* Electronically provided signatures are accepted as original signatures.				