

No. W 844

Due no later than January 31, 2007
Annual Report Form

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 applicable

PARKWAY 162 LIMITED LIABILITY COMPA
ROBERT D LILLY
3571 E IMMIGRANT PASS
BOISE, ID 83716

2. Registered Agent and Office NO PO BOX

ROBERT D LILLY
3571 E IMMIGRANT PASS
BOISE, ID 83716

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Robert D. Lilly	3571 E. Immigrant Pass	Boise	ID	83716

5. Organized Under the Laws of:

IDAHO
W 844

6.

Signature

Name (Typed or Printed)

Robert D. Lilly

Date

11/8/06

Title

Manager

Issued 11/01/2006

Do Not Tape or Staple

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