

No. <b>W 28939</b>	<b>Due no later than Mar 31, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> CFP, LLC 505 N ARGONNE RD. STE B206 SPOKANE VALLEY WA 99212		DOLFRED CONE 1007 BEAR CREEK PRINCETON ID 83857			
			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	DOLFRED CONE	1007 BEAR CREEK	PRINCETON	ID	USA	83857
MEMBER	JOHN E CONE	409 RUBY COURT	ROSEVILLE	CA	USA	95678
MEMBER	CHARLES R CONE	1509 RIDGEVIEW DR	CHENEY	WA	USA	99004
MEMBER	MICHAEL D CONE	505 N ARGONNE RD STE B206	SPOKANE VALLEY	WA	USA	99212
5. Organized Under the Laws of:  <b>ID</b> <b>W 28939</b>	6. Annual Report must be signed.*					
	Signature: Dolfred Cone		Date: 04/15/2010			
	Name (type or print): Dolfred Cone		Title: Agent			
Processed 04/15/2010		* Electronically provided signatures are accepted as original signatures.				