No. W 15554	Due no later than Jun 30, 2010	2. Registered Ager	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. SLADE ENTERPRISES LLC. LARRY AND CONNIE SLADE 1348 SE HAMILTON RD MOUNTAIN HOME ID 83647	1348 S E HAMIL MOUNTAIN HON	CONNIE SLADE 1348 S E HAMILTON RD MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:*			
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 LARRY SI MANAGER CONNIE S		MOUNTAIN HOME MOUNTAIN HOME		USA USA	83647 83647	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Connie Slade	Date: 07/09/2010				
W 15554	Name (type or print): Connie Slade	Title: Manager				
Processed 07/09/2010	* Electronically provided signatures are accepted as original signatures.					