

<b>No. W 61760</b>  Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Due no later than April 30, 2008</b> <b>Annual Report Form</b> 1. Mailing Address - Correct in this box, if applicable A & D ON-SITE STORAGE, LLC DAVID M ZIEGLER 30320 N SYLVAN RD ATHOL, ID 83801	<b>2. Registered Agent and Office NO PO BOX</b> DAVID M ZIEGLER 30320 N SYLVAN RD ATHOL, ID 83801  3. <u>New</u> Registered Agent Signature																		
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers.</b>																				
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>David Ziegler</td> <td>30320 N. Sylvan Rd.</td> <td>Athol</td> <td>ID</td> <td>83801</td> </tr> <tr> <td>Member</td> <td>Ammon Hubbard</td> <td>10363 Camp Ct.</td> <td>Hayden</td> <td>ID</td> <td>83835</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Member	David Ziegler	30320 N. Sylvan Rd.	Athol	ID	83801	Member	Ammon Hubbard	10363 Camp Ct.	Hayden	ID	83835
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<b>5. Organized Under the Laws of:</b> IDAHO W 61760	<b>6.</b> Signature <u><i>D M Z</i></u> Date <u>2/14/08</u> Name (Typed or Printed) <u>David M. Ziegler</u> Title <u>Member</u>																			

Issued 02/01/2008

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