

No. W 17565 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than December 31, 2007 Annual Report Form 1. Mailing Address - Correct in this box, if applicable GOODELL FAMILY, LLC 14899 SAND HOLLOW CALDWELL, ID 83607	2. Registered Agent and Office NO PO BOX MIKE GOODELL 14899 SAND HOLLOW RD CALDWELL, ID 83607 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <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 style="border-bottom: 1px solid black;">Manager</td> <td style="border-bottom: 1px solid black;">Mike Goodell</td> <td style="border-bottom: 1px solid black;">14899 Sand Hollow</td> <td style="border-bottom: 1px solid black;">Caldwell</td> <td style="border-bottom: 1px solid black;">Id.</td> <td style="border-bottom: 1px solid black;">83607</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Mike Goodell	14899 Sand Hollow	Caldwell	Id.	83607
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Manager	Mike Goodell	14899 Sand Hollow	Caldwell	Id.	83607									
5. Organized Under the Laws of: IDAHO W 17565	6. Signature <u>Michael R Goodell</u> Date <u>12-6-07</u> Name (Typed or Printed) <u>Michael R Goodell</u> Title <u>Manager</u>													

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