

No. J 532 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 July 31, 2008 Annual Report Form 1. Mailing Address: (Enter in this box if applicable) WAYNE HUMPHRIES FAMILY, LLP WAYNE HUMPHRIES <i>Shayla Hawkes</i> 820 E 4200 N <i>174 N. 680 W.</i> SHELLEY, ID 83274 <i>Blackfoot, ID</i> <i>83221</i>	2. Registered Agent and Office NO PO BOX WAYNE HUMPHRIES 533 E 1200 N SHELLEY, ID 83274 3. New Registered Agent Signature																		
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Partner</td> <td>Wayne Humphries</td> <td>533 E. 1200 N.</td> <td>SHELLEY</td> <td>ID</td> <td>83274</td> </tr> <tr> <td>Partner</td> <td>Shayla Hawkes</td> <td>174 N. 680 W.</td> <td>Blackfoot</td> <td>ID</td> <td>83221</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Partner	Wayne Humphries	533 E. 1200 N.	SHELLEY	ID	83274	Partner	Shayla Hawkes	174 N. 680 W.	Blackfoot	ID	83221
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5. Organized Under the Laws of: IDAHO J 532	6. Signature <i>Shayla Hawkes</i> Date <i>7-30-08</i> Name <i>Shayla Hawkes</i> Title <i>Partner</i>																			

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