

No. W 41328	Due no later than 7/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		KELLY R HARMON 25614 GOODSON RD PARMA ID 83660
	KZH L.L.C. 25614 GOODSON RD PARMA ID 83660		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 Zip
MANAGING MEMBER	KELLY R. HARMON	25614 GOODSON	PARMA ID 83660
MANAGING MEMBER	ZELDA G. HARMON	25614 GOODSON	PARMA, ID 83660
5. Organized Under the Laws of: ID W 41328		6. Annual Report must be signed. Signature: <u>Kelly R. Harmon</u> Date: <u>8-11-09</u> Name(type or print): <u>KELLY R. HARMON</u> Title: <u>MANAGER</u>	