No. W 44293		Due no later than Nov 30, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. COLLEGE PLACE, LLC SHERRI MYRE 621 W. MALLON, #509 SPOKANE WA 99201 USA		2425 NEZ PE LEWISTON	BILL LAWSON 2425 NEZ PERCE DR LEWISTON ID 83501 3. New Registered Agent Signature:*			
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	AWL LLC CHRIS ASHE	NBRENER	621 W MALLON #509 621 W MALLON #509	SPOKANE SPOKANE	WA WA	USA USA	99201 99201	
MEMBER	JOE & FRANC FAMILY PART	CES MCCANN LIMITED TNERS	621 W MALLON #509	SPOKANE	WA	USA	99201	
5. Organized Under the Laws of: 6. Ann		6. Annual Report must	. Annual Report must be signed.*					
ID W 44293		Signature: M Hottinger			Date: 09/16/2009			
		Name (type or print): M Hottinger			Title: Accountant			
Processed 09/16/2009	* Electronically provided signatures are accepted as original signatures.							