No. W 58596		Due no later than Jan 31, 2010		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ASPEN SWOPE, LLC MICHAEL J SWOPE 223 N 6TH ST #425 BOISE ID 83702			MICHAEL J SWOPE 223 N 6TH ST #425 BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	MICHAEL J	SWOPE	223 N 6TH ST #425		BOISE	ID	USA	83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 58596		Signature: Mary Jane Swope			Date: 12/22/2009			
		Name (type or print): Mary Jane Swope			Title: Co-Manager			
Processed 12/22/2009 * Electronically provided signatures are accepted as original signatures.								