

No. <b>W 30914</b>		Due no later than May 31, 2008		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> ROCK CITY REPAIR & SUPPLY, LLC DAVID E OGREN, SR P O BOX 194 ALMO ID 83312-0194		DAVID E OGREN SR 837 E 3049 S ALMO ID 83312-0194			
				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	Country	Postal Code	
MANAGER	DAVID E OGREN SR	P O BOX 194	ALMO	ID	USA	83312-0194	
5. Organized Under the Laws of:  <b>ID W 30914</b>		6. Annual Report must be signed.* Signature: David E. Ogren, Sr Name (type or print): David E. Ogren, Sr Date: 03/18/2008 Title: General Manager					
Processed 03/18/2008		* Electronically provided signatures are accepted as original signatures.					