

No. <b>W 3457</b>		<b>Due no later than Jan 31, 2009</b> <b>Annual Report Form</b>		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>1. Mailing Address: Correct in this box if needed.</b>  PARKER, WILKERSON & NUXOLL, CPAS, PLLC CARY O. WILKERSON 7235 W EMERALD STE A BOISE ID 83704 USA		CARY O. WILKERSON 7235 W. EMERALD STE A BOISE ID 83704			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
MEMBER	CARY O. WILKERSON, CPA, CHART	4619 EMERALD STE E	BOISE	ID	USA	83706	
MEMBER	BRUCE C. PARKER, CPA, CHARTERE	7235 W EMERALD STE A	BOISE	ID	USA	83704	
MEMBER	MARK A NUXOLL, CPA, CHARTERED	7235 W EMERALD ST STE A	BOISE	ID	USA	83704	
5. Organized Under the Laws of:  <b>ID</b> <b>W 3457</b>		6. Annual Report must be signed.*  Signature: Cary O Wilkerson Name (type or print): Cary O Wilkerson					
		Date: 01/23/2009 Title: President					
Processed 01/23/2009      * Electronically provided signatures are accepted as original signatures.							