

No. <b>W 6971</b>		<b>Due no later than Sep 30, 2011</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>  CAMPBELL CONSULTING, L.L.C. JEFFREY E CAMPBELL 3870 W. DEERPATH DR. BOISE ID 83714		JEFFREY E CAMPBELL 3870 W DEERPATH DR BOISE ID 83714			
<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	
MANAGER	JEFFREY E CAMPBELL	12 SPRING CREEK DR	HORSESHOE BEND	ID	USA	83629	
5. Organized Under the Laws of:  <b>ID</b> <b>W 6971</b>		6. Annual Report must be signed.*  Signature: Jeffrey E. Campbell Name (type or print): Jeffrey E. Campbell					
Processed 07/14/2011		Date: 07/14/2011 Title: Manager  * Electronically provided signatures are accepted as original signatures.					