

No. W 26474		Due no later than Oct 31, 2006		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. WALLY'S AUTO CARE CENTER, LLC C/O JOHN OHMAN ESQ PO BOX 51600 IDAHO FALLS ID 83405		WALLY STEWART 510 D STREET IDAHO FALLS ID 83405	
				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	WALLY STEWART	C/O JOHN M OHMAN ESQ PO BOX 51600	IDAHO FALLS	ID	83405
5. Organized Under the Laws of: IDAHO W 26474		6. Annual Report must be signed.* Signature: John M. Ohman Name (type or print): John M. Ohman Date: 08/17/2006 Title: Attorney			
Processed 08/17/2006		* Electronically provided signatures are accepted as original signatures.			