| No. W 51438 | | Due no later than Jun 30, 2012 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|--|--|-----------------------|--|------------|----------------|--|
| Return to: | | Annual Report Form | | | JAMES E LEADBETTER 18 IDEAL ACRES RD SALMON ID 83467 | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. J & J TREE & BUCKET SERVICE, LLC JAMES E LEADBETTER 18 IDEAL ACRES RD SALMON ID 83467-5120 USA | | | | | | |
| | | | | SALMON IL | SALIVION ID 63467 | | | |
| | | | | 3. <u>New</u> Registe | 3. New Registered Agent Signature:* | | | |
| | | | | | | | | |
| 4. Limited Liability Com | npanies: Enter Na | mes and Addresses | of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER MEMBER | JAMES E LEADBETTER JOANNE B LEADBETTER | | 18 IDEAL ACRES RD 18 IDEAL ACRES RD | SALMON SALMON | ID ID | USA USA | 83467 83467 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 51438 | | Signature: C.A.Bloodgood | | | Date: 04/18/2012 | | | |
| | | Name (type or | | Title: Accountant | | | | |
| Processed 04/18/2012 | | * Electronically pro | ovided signatures are accepted as origin | nal signatures. | | | | |