

No. W 13666	Due no later than December 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable EARLY MORNING ELK LIMITED LIABILITY 4142 SHOSHONE FALLS GRADE TWIN FALLS, ID 83301		TED L REA 4142 SHOSHONE FALLS GRADE TWIN FALLS, ID 83301 <i>Handwritten: TED L REA</i> <i>Handwritten: 10858</i> New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Ted Rea</td> <td>4142 Shoshone Falls Grade</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary</td> <td>Dorothy Rea</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Ted Rea	4142 Shoshone Falls Grade	Twin Falls	ID	83301	Secretary	Dorothy Rea				
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President	Ted Rea	4142 Shoshone Falls Grade	Twin Falls	ID	83301																
Secretary	Dorothy Rea																				
5. Organized Under the Laws of: IDAHO W 13666	6. Signature <i>Dorothy Rea</i> Date <u>11-10-08</u> Name (Typed or Printed) <u>Dorothy Rea</u> Title <u>Sec.</u>																				

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Do Not Tape or Staple

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