

No. W 49207	Due no later than April 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX GARY R SIPE 763 CAMPUS DR TWIN FALLS, ID 83301	
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 SHELBY ESTATES LLC GARY R SIPE 763 CAMPUS DR TWIN FALLS, ID 83301		3. New Registered Agent Signature	
4. Limited Liability Companies: Enter Names and Addresses of Managers.				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
<u>Zip</u>				
President owner	Gary Sipe	PO Box 883	Twin Falls,	ID 83303
5. Organized Under the Laws of: IDAHO W 49207		6. Signature <u>Gary Sipe</u> Date <u>4-19-08</u> Name (Typed or Printed) <u>Gary Sipe</u> Title <u>owner</u>		

Issued 02/01/2008

Do Not Tape or Staple

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