No. W 63844 Return to:		Due no later than Jun 30, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. TOM SULLIVANT PROPERTIES, 1165, LLC THOMAS SULLIVANT 930 N COLE RD BOISE ID 83704-8640 USA			2. Registered Agent and Address (NO PO BOX) THOMAS SULLIVANT 930 N COLE RD BOISE ID 83704-8640 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	THOMAS SU	JLLIVANT	7001 OLD REDMOND RD	REDMOND	WA	USA	98052	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 63844		Signature: Do		Date: 06/08/2011				
		Name (type or		Title: Director				
Processed 06/08/2011 * Electronically provided signatures are accepted as original signatures.								