

No. W 56725	Due no later than Dec 31, 2009 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JUNE W LLOYD 3057 S 750 E ALMO ID 83312			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CITY OF ROCKS RETREAT LLC JUNE W LLOYD PO BOX 199 ALMO ID 83312		3. <u>New</u> Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
owner	June Lloyd	3057 S. 750 E.	Almo	Id		83312
owner	Klint M Lloyd	3057 S. 750 E.	Almo	Id		83312
5. Organized Under the Laws of: IDAHO W 56725		6. Signature: <u>June Lloyd</u> Date: <u>2/2/10</u> Name (type or print): <u>June Lloyd</u> Title: <u>owner</u>				
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