| No. W 15185 | Due no later than April 30, 20 | 06 | 2. Registered Agent and Office NO PO BO) | | |
|---|--|----------------------|---|--------------------|------------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFEF SON PO BOX 83720 BOISE, ID 83720-C)80 | Annual Report Form 1. Mailing Address - Correct in this box, if applicable RYSKAYP CLAY STREET SINGLE FAMILY U 189 COMMONS RD IDAHO FALLS, ID 83401 | | DOROTHY KEEFER RYSKAMP 189 COMMONS RD IDAHO FALLS, ID 83401 | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | 3. New Registered Agent Signature | | |
| Limited Liability Compa | inies: Enter Names and Addresses of Ma | anagers. | | | |
| Office held Name | Street or P.O. Address | <u>City</u> | • | State CD | <u>Zip</u> |
| MANAGER DORGTWY MEMBER JOHN | RYSKAMP 189 COMMONS RD | Idaho Fi Idaho Fi | | | 83401 83401 |
| | | | | | |
| 5. Organized Under the Laws of: | 6. Signature | Rush | earf Da | ate _2/ | 12/06 |
| | Signature Jorthy | Ryspe | | | 12/06 INA GER |