

No. W 64722		Due no later than Jul 31, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		SHAWN ANDERSON 4599 W 4900 S MALAD ID 83252			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ANDERSON FEED L.L.C. SHAWN ANDERSON 3650 N 3650 W MOORE ID 83255					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	SHAWN ANDERSON	3650 N 3650 W	MOORE	ID	USA	83255	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 64722		Signature: Shawn Anderson				Date: 05/18/2009	
		Name (type or print): Shawn Anderson				Title: Owner	
Processed 05/18/2009		* Electronically provided signatures are accepted as original signatures.					