


No. W 29063	Due no later than March 31, 2006		2. Registered Agent and Office 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		TIMOTHY J ALLEN												
	1. Mailing Address - Correct in this box, if applicable ETERNAL OPTIONS, LLC PO BOX 66 CLARK FORK, ID 83811		121 ANTELOPE LOOP CLARK FORK, ID 83811 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>TIMOTHY J. ALLEN</td> <td>PO BOX 66</td> <td>CLARK FORK</td> <td>ID.</td> <td>83811</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	TIMOTHY J. ALLEN	PO BOX 66	CLARK FORK	ID.	83811
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER	TIMOTHY J. ALLEN	PO BOX 66	CLARK FORK	ID.	83811										
5. Organized Under the Laws of: IDAHO W 29063	6. Signature <u></u> Date <u>1-7-06</u> Name <small>(Typed or Printed)</small> <u>TIMOTHY J. ALLEN</u> Title <u>MANAGER</u>														

Issued 01/04/2006

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