

No. **W 17759**Due no later than **January 31, 2007****Annual Report Form**Return to:
**SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080**

1. Mailing Address - Correct in this box, if applicable

**JACK AND EDNA WINCHESTER LLC
29900 HEXON RD
PARMA, ID 83660**2. Registered Agent and Office **NO PO BOX****EDWARD J WINCHESTER
29900 HEXON RD
PARMA, ID 83660****NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Jack Winchester	29900 Hexon Rd,	Parma	ID	83660
Assistant Manager	Edna Winchester	Hexon Rd.	Parma.	ID	83660

5. Organized Under the Laws of:
**IDAHO
W 17759**

6.

Signature

Edna Winchester

Date

11-27-06

Name (Typed or Printed)

Edna Winchester

Title

*Part owner
A Manager*

Issued 11/01/2006

Do Not Tape or Staple

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