

No. W 49971

Due no later than April 30, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

WCM LLC
WILLIAM S MAGNUSON
~~5908 W GOWEN RD~~
~~BOISE, ID 83709~~

1457 W. Stafford Dr.
Eagle, ID
83616.

WILLIAM S MAGNUSON

~~5908 W GOWEN RD~~

~~BOISE, ID 83709~~

1457 W. Stafford Dr.
Eagle, ID 83616

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
Office Manager	William S. Magnuson	1457 W. Stafford Dr. Eagle, ID. 83616	Eagle	Idaho	83616.

5. Organized Under the Laws of:
IDAHO
W 49971

6.

Signature

Name (Typed or Printed)

William S. Magnuson

Date 3-16-07

Title Office manager

Issued 02/01/2007

Do Not Tape or Staple

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