

No. W 74714	Due no later than May 31, 2010 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. FOREST RECOVERY SYSTEMS, LLC LEWIS M WORK 797 S SILVER BOW AVE BOISE ID 83616		LEWIS M WORK 797 S SILVER BOW AVE BOISE ID 83616			
			3. <u>New</u> Registered Agent Signature:*			
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	LEWIS M WORK	797 S SILVER BOW AVE	BOISE	ID	USA	83616
5. Organized Under the Laws of: ID W 74714	6. Annual Report must be signed.* Signature: Lewis M Work Name (type or print): Lewis M Work		Date: 04/10/2010 Title: Manager			
Processed 04/10/2010		* Electronically provided signatures are accepted as original signatures.				