No. W 47499		Due no later than Feb 29, 2008		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			KAREN SUZANNE ARTERBURN 3145 MEADOW LANE AMMON ID 83406			
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed.					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SNOWY EGRET TECHNICAL LLC KAREN S ARTERBURN 3145 MEADOW LANE		All Hold ID				
	AMMON ID	AMMON ID 83406		3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	lames and Addresse	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER KAREN S ARTERBURN 3145 MEADOW LANE		3145 MEADOW LANE	AMMON	ID	USA	83406	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Ka		Date: 02/28/2008				
W 47499	Name (type o		Title: Manager				
Processed 02/28/2008	* Electronically p	* Electronically provided signatures are accepted as original signatures.					