No. W 19631		Due no later than Jun 30, 2009	2. Registered Agent and Address (NO PO BOX) DR ROY L ROMEY 405 STYNER AVENUE MOSCOW ID 83843 3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PALOUSE IMAGING, L.L.C. ROY L ROMEY, MD PO BOX 9105 MOSCOW ID 83843				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Comp	panies: Enter Nan	nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER ROY L ROM		EY 405 STYNER AVENUE	MOSCOW	ID	USA	83843
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID W 19631		Signature: Roy L. Romey	Date: 04/23/2009			
		Name (type or print): Roy L. Romey	Title: Manager			
Processed 04/23/2009	* Electronically provided signatures are accepted as original signatures.					