

No. W 53305		Due no later than Aug 31, 2009		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		Annual Report Form		ROBERT WILKINS 8 WOOD ACRE RD SALMON ID 83467			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		W.T.W., L.L.C. ROBERT E. WILKINS 8 WOOD ACRE RD SALMON ID 83467					
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	
MEMBER	ROBERT WILKINS	PO BOX 985	SALMON	ID	USA	83467	
MEMBER	THOMAS WILKINS	1000 LEADORE AVE	SALMON	ID	USA	83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 53305		Signature: Robert E. Wilkins				Date: 08/04/2009	
		Name (type or print): Robert E. Wilkins				Title: Pres.	
Processed 08/04/2009		* Electronically provided signatures are accepted as original signatures.					