	Due no later than October 31, 2007	To Date to
Return to:	Annual Report Form	2. Registered Agent and Office
SECRETARY OF STATE	1. Mailing Address - Correct in this box: if applicable	AUGUST JOHNSON
450 NORTH FOURTH STREET PO BOX 83720	E R VENTURES LLC AUGUST JOHNSON	1623 N BLUFF ST BOISE, ID 83706
BOISE, ID 83720-0080	1623 N BLUFF ST	1 - 3 - 3 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6
•	BOISE, ID 83706	
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		TELL TIOSISTING AGENT SIGNATURE
Limited Liability Compani	ies: Enter Names and Addresses of Managers.	
Office held Name	Addresses of Managers.	
Magine 1	Street or P.O. Address City	/ State 71-
Manger Angust	Three or P.O. Address Three 1623 W. Buffst.	Boise Id 83706
(, , , , ,	20 July 24	Doise +0 85/06
Organized Under the Laws of:	6.	
IDAHO	Signature	Q-70 N7
	Signature	Date 8-78-07
IDAHO W 43603		
IDAHO		184 Title fresiden 1