

No. W 20776	Due no later than September 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable  NORTHWEST CENTER, LLC PO BOX 1332 LEWISTON, ID 83501		MARY CATHERINE MORRIS 1816 IDAHO ST LEWISTON, ID 83501												
NO FILING FEE IF RECEIVED BY DUE DATE			3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Owner Man</td> <td>Mary Catherine Morris</td> <td>P.O. Box 1332</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Owner Man	Mary Catherine Morris	P.O. Box 1332	Lewiston	ID	83501
Office held	Name	Street or P.O. Address	City	State	Zip										
Owner Man	Mary Catherine Morris	P.O. Box 1332	Lewiston	ID	83501										
5. Organized Under the Laws of:  IDAHO W 20776		6. Signature <u>M. Catherine Morris</u> Date <u>July 15 08</u> Name (Typed or Printed) <u>M. CATHERINE MORRIS</u> Title <u>Owner-Man</u>													

Issued 07/01/2008

Do Not Tape or Staple

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