

No. W 34782 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than November 30, 2007 Annual Report Form 1. Mailing Address - Correct in this box, if applicable 202 GALVESTON, LLC 9387 N SNAFFLE BIT LN KUNA, ID 83634	2. Registered Agent and Office NO PO BOX TAMI MCHUGH 9387 N SNAFFLE BIT LN KUNA, ID 83634 3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers.																				
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Tami McHugh</td> <td>9387 N. Shaffle Bit Ln.</td> <td>Kuna</td> <td>ID</td> <td>83634</td> </tr> <tr> <td>Member</td> <td>Tim McHugh</td> <td>9387 N. Shaffle Bit Ln.</td> <td>Kuna</td> <td>ID</td> <td>83634</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Member	Tami McHugh	9387 N. Shaffle Bit Ln.	Kuna	ID	83634	Member	Tim McHugh	9387 N. Shaffle Bit Ln.	Kuna	ID	83634
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Member	Tim McHugh	9387 N. Shaffle Bit Ln.	Kuna	ID	83634															
5. Organized Under the Laws of: IDAHO W 34782	6. Signature <u>Tami McHugh</u> Date <u>10/1/07</u> Name (Typed or Printed) <u>Tami McHugh</u> Title <u>Member</u>																			

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