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|--|---|---|--|-------|---------|-------------|
| No. <b>W 9916</b>  | <b>Due no later than Oct 31, 2009</b><br><b>Annual Report Form</b>  |   | 2. Registered Agent and Address <b>(NO PO BOX)</b>                     |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>PALLETS PLUS OF IDAHO, LLC<br>ALLYSON K. WALKER<br>470 COVENTRY COURT<br>IDAHO FALLS ID 83404<br>USA |   | KEITH AND ALLYSON WALKER<br>470 COVENTRY COURT<br>IDAHO FALLS ID 83404 |       |         |             |
|  |   |   | 3. <u>New</u> Registered Agent Signature:*                             |       |         |             |
| 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   | KEITH T. WALKER   | 470 COVENTRY COURT  | IDAHO FALLS  | ID    | USA     | 83404       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 9916</b>  | 6. Annual Report must be signed.*<br>Signature: Allyson K. Walker<br>Name (type or print): Allyson K. Walker  |   | Date: 10/05/2009<br>Title: Owner                                       |       |         |             |
| Processed 10/05/2009   |   | * Electronically provided signatures are accepted as original signatures. |  |       |         |             |