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|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|
| No. <b>W 1817</b>                                                                                                                                           | <b>Annual Report Form 1999</b><br>Due No Later Than November 30.                                                                   |  | 2. Registered Agent and Office NOT A P.O. BOX                                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>* FIRST NOTICE *</b> | 1. Mailing Address - Please Correct If Not Correct<br><b>MACCALL MANAGEMENT, L.L.C.</b><br><b>CONTROLLER</b><br><b>PO BOX 4106</b> |  | <b>C T CORPORATION SYSTEM</b><br><b>300 N 6TH ST</b><br><br><b>BOISE ID 83701</b> |
|                                                                                                                                                             | <b>SALT LAKE CITY UT 84110</b>                                                                                                     |  | 3. Organized Under the Laws of:<br><b>UT W 1817</b>                               |

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**  
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☒ **Members** (check one)

| Office held | Name             | Street or P.O. Address | City | State | Zip   |
|-------------|------------------|------------------------|------|-------|-------|
| Member      | Charles Maggelet | 732 Northcrest         | SLC  | UT    | 84111 |
| Member      | Crystal Maggelet | " "                    | "    | "     | "     |

|                                      |                                                                                                                                        |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| 5. Signature of New Registered Agent | 6.                                                                                                                                     |
|                                      | Signature <u>Tracie M Roberts Agent</u> Date <u>7/19/99</u><br>Name (Typed or Printed) <u>Tracie M Roberts</u> Title <u>Controller</u> |

ISSUED: 07-03-1999

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