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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 102700</b>                                                                                                                                    |                   | <b>Due no later than Apr 30, 2014</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>Annual Report Form</b>                                                                                                                              |       | HOLLY BEHLING<br>3125 RAWSON ST<br>AMMON ID 83406  |         |             |  |
|                                                                                                                                                        |                   | <b>1. Mailing Address: Correct in this box if needed.</b><br>RIDERS' PROPERTIES, LLC<br>HOLLY J BEHLING<br>PO BOX 51058<br>IDAHO FALLS ID 83405<br>USA |       | 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                                                                                                                                                 | HOLLY J BEHLING   | 3125 RAWSON ST                                                                                                                                         | AMMON | ID                                                 | USA     | 83406       |  |
| MANAGER                                                                                                                                                | JO ANNE R SUMMERS | 3220 RAWSON ST                                                                                                                                         | AMMON | ID                                                 | USA     | 83406       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 102700</b>                                                                                              |                   | 6. Annual Report must be signed.*<br>Signature: Holly Jo Behling<br>Name (type or print): Holly Jo Behling                                             |       |                                                    |         |             |  |
|                                                                                                                                                        |                   | Date: 02/12/2014<br>Title: Treasurer                                                                                                                   |       |                                                    |         |             |  |
| Processed 02/12/2014                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                              |       |                                                    |         |             |  |