

|                                                                                                                                                        |                |                                                                                                                                      |        |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 17202</b>                                                                                                                                     |                | <b>Due no later than Nov 30, 2009</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>                                                                                                            |        | GLENN A WARD<br>200 E 500 S<br>BURLEY ID 83318     |         |             |  |
|                                                                                                                                                        |                | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>WARD HOLDING LLC<br>GLENN A WARD<br>200 E 500 S<br>BURLEY ID 83318  |        | 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 |  |
| MANAGER                                                                                                                                                | GLENN A WARD   | 200 E 500 S                                                                                                                          | BURLEY | ID                                                 | USA     | 83318       |  |
| MANAGER                                                                                                                                                | CHRISTINE WARD | 200 E 500 S                                                                                                                          | BURLEY | ID                                                 | USA     | 83318       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 17202</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Glenn Ward<br>Name (type or print): Glenn Ward<br>Date: 10/07/2009<br>Title: Manager |        |                                                    |         |             |  |
| Processed 10/07/2009                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                            |        |                                                    |         |             |  |