| No. W 20077 | | Due no later than Jul 31, 2010 2. Registered Agent and Address (NO PO BOX) | | | | | | |
|--|------------------------|--|------------------------------------|--|-------|---------|---------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. CDS STONERIDGE PARTNERS, L.C. MARCUS SHERMAN 5295 S COMMERCE DR STE 175 MURRAY UT 84107 | | BRAD HANSEN 364 STONERIDGE ROAD BLANCHARD ID 83804 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 200 | | mes and Addresses | of at least one Member or Manager. | C'h | Chata | C | De stal Carla | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | | | 5295 S COMMERCE DR #175 | MURRAY | UT | USA | 84107 | |
| MANAGER | IGER CHRISTIAN V YOUNG | | 5295 S COMMERCE DR STE 175 | MURRAY | UT | USA | 84107 | |
| MANAGER DEAN A ALL | | .ARA | 5295 S COMMERCE DR STE 175 | MURRAY | UT | USA | 84107 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ИТ W 20077 | | Signature: Marcus Sherman | | Date: 08/15/2010 | | | | |
| | | Name (type or print): Marcus Sherman | | Title: Authorized Agent | | | | |
| Processed 08/15/2010 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |