

No. W 68799	Due no later than November 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable 660 NORTH FOURTH AVE LLC PO BOX 284 SUN VALLEY, ID 83353		TOBIAS C RIPSOM 240 LEADVILLE AVE N KETCHUM, ID 83340 3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Tobias Ripsom</td> <td>PO Box 284</td> <td>Sun Valley</td> <td>ID</td> <td>83353</td> </tr> <tr> <td>Member</td> <td>VP Companies</td> <td>PO Box 284</td> <td>Sun Valley</td> <td>ID</td> <td>83383</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Tobias Ripsom	PO Box 284	Sun Valley	ID	83353	Member	VP Companies	PO Box 284	Sun Valley	ID	83383
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5. Organized Under the Laws of: IDAHO W 68799		6. Signature  Date <u>9/22/08</u> Name (Typed or Printed) <u>Tobias Ripsom</u> Title <u>Manager</u>																			

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Do Not Tape or Staple

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