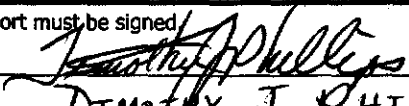


No. C 103378	Due no later than 9/30/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		TIM PHILLIPS 6854 S EISENMAN RD BOISE ID 83716
	GEM STATE CONFECTIONERIES, INC. TIM PHILLIPS 6854 S EISENMAN RD BOISE ID 83716		3. <u>New</u> Registered Agent Signature: _____
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
Office Held	Name	Street or PO Address	City State Zip
CEO/PRES/	TIM PHILLIPS,	6854 S. EISENMAN,	BOISE, ID 83716
VICE PRES	SHARON PHILLIPS,	6854 S. EISENMAN,	BOISE, ID 83716
SEC/TREAS			
DIRECTORS:			
	TIMOTHY J. PHILLIPS,	6854 S. EISENMAN RD,	BOISE, ID 83716
	SHARON F. PHILLIPS,	6854 S. EISENMAN RD,	BOISE, ID 83716
5. Organized Under the Laws of:	6. Annual Report must be signed		
ID C 103378	Signature: 	Date: <u>7/31/09</u>	
	Name(type or print): <u>TIMOTHY J. PHILLIPS</u>	Title: <u>CEO/PRES</u>	