

| <b>No. W 4151</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Due no later than June 30, 2006</b><br><b>Annual Report Form</b>                                                                                           |                        | <b>2. Registered Agent and Office NO PO BOX</b><br>BURDETTE L AMEND<br>122 BAYHORSE RD<br>BELLEVUE, ID 83313 |             |       |                        |      |       |     |         |                  |            |          |    |       |  |                 |             |         |    |       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------------------------|-------------|-------|------------------------|------|-------|-----|---------|------------------|------------|----------|----|-------|--|-----------------|-------------|---------|----|-------|
| 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>1. Mailing Address - Correct in this box, if applicable</b><br>PROFESSIONAL RADIANT SYSTEM, L.L.C.<br>BURDETTE L AMEND<br>PO BOX 206<br>BELLEVUE, ID 83313 |                        | <b>3. New Registered Agent Signature</b>                                                                     |             |       |                        |      |       |     |         |                  |            |          |    |       |  |                 |             |         |    |       |
| <b>4. Limited Liability Companies: Enter Names and Addresses of Members.</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black;">Manager</td> <td style="border-bottom: 1px solid black;">Burdette L Amend</td> <td style="border-bottom: 1px solid black;">PO Box 206</td> <td style="border-bottom: 1px solid black;">Bellevue</td> <td style="border-bottom: 1px solid black;">Id</td> <td style="border-bottom: 1px solid black;">83313</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;">David F. Wilson</td> <td style="border-bottom: 1px solid black;">PO Box 6770</td> <td style="border-bottom: 1px solid black;">Ketchum</td> <td style="border-bottom: 1px solid black;">Id</td> <td style="border-bottom: 1px solid black;">83340</td> </tr> </tbody> </table> |                                                                                                                                                               |                        |                                                                                                              | Office held | Name  | Street or P.O. Address | City | State | Zip | Manager | Burdette L Amend | PO Box 206 | Bellevue | Id | 83313 |  | David F. Wilson | PO Box 6770 | Ketchum | Id | 83340 |
| Office held                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Name                                                                                                                                                          | Street or P.O. Address | City                                                                                                         | State       | Zip   |                        |      |       |     |         |                  |            |          |    |       |  |                 |             |         |    |       |
| Manager                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Burdette L Amend                                                                                                                                              | PO Box 206             | Bellevue                                                                                                     | Id          | 83313 |                        |      |       |     |         |                  |            |          |    |       |  |                 |             |         |    |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | David F. Wilson                                                                                                                                               | PO Box 6770            | Ketchum                                                                                                      | Id          | 83340 |                        |      |       |     |         |                  |            |          |    |       |  |                 |             |         |    |       |
| <b>5. Organized Under the Laws of:</b><br>IDAHO<br>W 4151                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>6.</b><br>Signature <u>Burdette L Amend</u> Date <u>4-19-06</u><br>Name <small>(Typed or Printed)</small> <u>BURDETTE L. AMEND</u> Title <u>MANAGER</u>    |                        |                                                                                                              |             |       |                        |      |       |     |         |                  |            |          |    |       |  |                 |             |         |    |       |

Issued 04/03/2006

Do Not Tape or Staple

200606000449