

|  |                         |  |          |  |         |             |  |
|--|-------------------------|--|----------|--|---------|-------------|--|
| No. <b>W 22980</b>   |                         | <b>Due no later than Feb 28, 2006</b><br><b>Annual Report Form</b>   |          | 2. Registered Agent and Address ( <b>NO PO BOX</b> )       |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                         | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>OVERHEAD SMASH TENNIS AND APPAREL, LLC<br>1122 W. BARRYMORE DR.<br>MERIDIAN ID 83642 0000 |          | DOUGLAS A MAUDE<br>4212 E BOREAL CT<br>NAMPA ID 83687 0000 |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                         |  |          | 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 |  |
| MEMBER   | DOUGLAS A MAUDE         | 1122 W. BARRYMORE DR.  | MERIDIAN | ID   | 83642   |             |  |
| MEMBER   | GABRIELLE G BRAUN MAUDE | 1122 W. BARRYMORE DR.  | MERIDIAN | ID   | 83642   |             |  |
| 5. Organized Under the Laws of:<br><br><b>IDAHO</b><br><b>W 22980</b>                              |                         | 6. Annual Report must be signed.*<br><br>Signature: Douglas A. Maude<br>Name (type or print): Douglas A. Maude   |          |  |         |             |  |
|  |                         | Date: 02/28/2006<br>Title: Managing Member   |          |  |         |             |  |
| Processed 02/28/2006 * Electronically provided signatures are accepted as original signatures.     |                         |  |          |  |         |             |  |