

|                                                                                                                                                        |                   |                                                                                                                                                                 |             |                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|---------|-------------|--|
| No. <b>C 174816</b>                                                                                                                                    |                   | <b>Due no later than Aug 31, 2011</b>                                                                                                                           |             | <b>2. Registered Agent and Address (NO PO BOX)</b>         |         |             |  |
| 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 needed.</b><br><br>BROOKS & ASSOCIATES, INC.<br>CLINTON M BROOKS<br>2809 LAGUNA DR<br>IDAHO FALLS ID 83404<br>USA |             | CLINTON M BROOKS<br>2809 LAGUNA DR<br>IDAHO FALLS ID 83404 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                                 |             | 3. <u>New</u> Registered Agent Signature:*                 |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                   |                                                                                                                                                                 |             |                                                            |         |             |  |
| Office Held                                                                                                                                            | Name              | Street or PO Address                                                                                                                                            | City        | State                                                      | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | CLINTON M BROOKS  | 2809 LAGUNA DRIVE                                                                                                                                               | IDAHO FALLS | ID                                                         | USA     | 83404       |  |
| SECRETARY                                                                                                                                              | MARGARET F BROOKS | 2809 LAGUNA DRIVE                                                                                                                                               | IDAHO FALLS | ID                                                         | USA     | 83404       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 174816</b>                                                                                          |                   | 6. Annual Report must be signed.*<br>Signature: Clinton M Brooks<br>Name (type or print): Clinton M Brooks<br>Date: 06/16/2011<br>Title: President              |             |                                                            |         |             |  |
| Processed 06/16/2011                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                       |             |                                                            |         |             |  |