| No. W 50360 | | Due no later than May 31, 2008 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------------------------|--|--|-------------------------|--|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF | | Annual Report Form 1. Mailing Address: Correct in this box if needed. WDG SHADOW RIDGE, LLC PO BOX 51298 IDAHO FALLS ID 83405 | | 901 PIER \ IDAHO FAL | THEL W CASPER ESQ 901 PIER VIEW DR STE 201 IDAHO FALLS ID 83402 3. New Registered Agent Signature:* | | | |
| RECEIVED BY D 4. Limited Liability Comi | | mes and Addresses of | at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| Manager Manager | CORTNEY LIDDIARD MIKE VICKERS | | PO BOX 51298 1985 E 183 N | IDAHO FALL REXBURG | S ID ID | USA USA | 83405 83440 | |
| 5. Organized Under the Laws of: | | 6. Annual Report mu | | | | | | |
| ID W 50360 | | Signature: Cortney Liddiard | | | Date: 04/16/2008 | | | |
| | | Name (type or pri | | Title: Manager | | | | |
| Processed 04/16/2008 | | * Electronically provid | led signatures are accepted as origina | al signatures. | | | | |