

|                                                                                                                                                        |                  |                                                                                                                                                               |       |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------|---------|-------------|--|
| No. <b>C 130458</b>                                                                                                                                    |                  | <b>Due no later than Sep 30, 2009</b>                                                                                                                         |       | 2. Registered Agent and Address <b>(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>SALMON RIVER DORIES, INC.<br>GAIL A SIEGEL<br>1995 TEXAS RIDGE ROAD<br>DEARY ID 83823<br>USA |       | LONNIE HUTSON<br>1995 TEXAS RIDGE ROAD<br>DEARY ID 83823 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                               |       | 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 |  |
| SECRETARY                                                                                                                                              | GAIL A. SIEGEL   | 1995 TEXAS RIDGE ROAD                                                                                                                                         | DEARY | ID                                                       | USA     | 83823       |  |
| PRESIDENT                                                                                                                                              | LONNIE R. HUTSON | 1995 TEXAS RIDGE ROAD                                                                                                                                         | DEARY | ID                                                       | USA     | 83823       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 130458</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Gail A. Siegel<br>Name (type or print): Gail A. Siegel<br>Date: 07/20/2009<br>Title: Vice President/Secretary |       |                                                          |         |             |  |
| Processed 07/20/2009                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                     |       |                                                          |         |             |  |