

|                                                                                                                                                        |             |                                                                                     |                |                                                           |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------|------------------|-------------|--|
| No. <b>W 18010</b>                                                                                                                                     |             | <b>Due no later than Feb 29, 2008</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>Annual Report Form</b>                                                           |                | AARON J POVEY<br>2501 POVEY RD<br>AMERICAN FALLS ID 83211 |                  |             |  |
|                                                                                                                                                        |             | <b>1. Mailing Address: Correct in this box if needed.</b>                           |                | 3. <u>New</u> Registered Agent Signature:*                |                  |             |  |
|                                                                                                                                                        |             | GOOD TIME MOTORS, L.L.C.<br>AARON POVEY<br>2501 POVEY RD<br>AMERICAN FALLS ID 83211 |                |                                                           |                  |             |  |
| 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 |  |
| MANAGER                                                                                                                                                | AARON POVEY | 2503 POVEY RD                                                                       | AMERICAN FALLS | ID                                                        | USA              | 83211       |  |
| 5. Organized Under the Laws of:                                                                                                                        |             | 6. Annual Report must be signed.*                                                   |                |                                                           |                  |             |  |
| <b>ID<br/>W 18010</b>                                                                                                                                  |             | Signature: Aaron Povey                                                              |                |                                                           | Date: 01/02/2008 |             |  |
|                                                                                                                                                        |             | Name (type or print): Aaron Povey                                                   |                |                                                           | Title: Manager   |             |  |
| Processed 01/02/2008                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.           |                |                                                           |                  |             |  |