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|--|--------------------|--|-------------|--|---------|-------------|--|
| No. W 21181 | | Due no later than Oct 31, 2008 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. LEGS, LLC EMERY G STODDARD 1711 E 400 N ST ANTHONY ID 83445 USA | | LANA R STODDARD 1711 E 400 N ST ANTHONY ID 83445 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 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 | LECIA D STODDARD | 1711 E 400 N | ST. ANTHONY | ID | USA | 83445 | |
| MEMBER | STEPHEN G STODDARD | PO BOX 196 | PARKER | ID | USA | 83438-0196 | |
| MANAGER | E GENE STODDARD | 1707 E 400 N | ST ANTHONY | ID | USA | 83445 | |
| 5. Organized Under the Laws of: ID W 21181 | | 6. Annual Report must be signed.* Signature: E. Gene Stoddard Name (type or print): E. Gene Stoddard | | | | | |
| | | Date: 08/29/2008 Title: Manager | | | | | |
| Processed 08/29/2008 | | * Electronically provided signatures are accepted as original signatures. | | | | | |