

No. W 12990	Due no later than September 30, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable SUNRIVER LAND, L.L.C. 358 SOUTH 1000 WEST BLACKFOOT, ID 83221		MICHAEL J JENSEN 358 SOUTH 1000 WEST BLACKFOOT, ID 83221 3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Managing Member</td> <td>Michael J. Jensen</td> <td>358 S. 1000 W.</td> <td>Blackfoot</td> <td>ID.</td> <td>83221</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Managing Member	Michael J. Jensen	358 S. 1000 W.	Blackfoot	ID.	83221
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Managing Member	Michael J. Jensen	358 S. 1000 W.	Blackfoot	ID.	83221										
5. Organized Under the Laws of: IDAHO W 12990		6. Signature <i>Michael J Jensen</i> Date <u>7-26-07</u> Name (Typed or Printed) <u>Michael J. Jensen</u> Title <u>Managing Member</u>													

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Do Not Tape or Staple

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