

|                                                                                                                                                        |                |                                                                               |      |                                                            |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------|------|------------------------------------------------------------|------------------|-------------|--|
| No. <b>W 67133</b>                                                                                                                                     |                | <b>Due no later than Sep 30, 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>                                                     |      | NEIL WIMBERLEY<br>460 OLD COUGAR CREEK RD<br>HOPE ID 83836 |                  |             |  |
|                                                                                                                                                        |                | <b>1. Mailing Address: Correct in this box if needed.</b>                     |      | 3. <u>New</u> Registered Agent Signature:*                 |                  |             |  |
|                                                                                                                                                        |                | HOODOO VALLEY FARM LLC<br>NEIL WIMBERLEY<br>PO BOX 54<br>HOPE ID 83836<br>USA |      |                                                            |                  |             |  |
| 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                                                                                                                                                | NEIL WIMBERLEY | PO BOX 54                                                                     | HOPE | ID                                                         | USA              | 83836       |  |
| MANAGER                                                                                                                                                | ANN WIMBERLEY  | PO BOX 54                                                                     | HOPE | ID                                                         | USA              | 83836       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                             |      |                                                            |                  |             |  |
| <b>ID<br/>W 67133</b>                                                                                                                                  |                | Signature: Neil Wimberley                                                     |      |                                                            | Date: 08/19/2008 |             |  |
|                                                                                                                                                        |                | Name (type or print): Neil Wimberley                                          |      |                                                            | Title: Manager   |             |  |
| Processed 08/19/2008                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.     |      |                                                            |                  |             |  |