| No.  Return to: SECRETARY OF STATE                         | Due no later than February 28, 2007  Annual Report Form  1. Mailing Address - Correct in this box. if applicable | 2. Registered Agent and Office NO PO BOX<br>MAC R MAYER<br>1616 ADDISON AVE EAST |
|--|--|--|
| 700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | PREFERRED PROPERTY MANAGEMENT L.L.C<br>1616 ADDISON AVE EAST<br>TWIN FALLS, ID 83301                             | TWIN FALLS, ID 83301   |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE                   |  | 3. New Registered Agent Signature  |
| 4. Limited Liability Compa                                 | anies: Enter Names and Addresses of Members.   |  |
| Office held Name Member Mac R. Member Adrean               | Mayer 1616 Address Base 1616 Address Ave. Tu   | State Zip<br>Sin Falls Id 83301<br>Sin Falls Id 83301                            |
|  |  |  |
| 5. Organized Under the Laws of:<br>IDAHO<br>W 37018        | 6. Signature Mu Alley Name (Typed or MAC & MAU ext   | Date 12/18/06 Title Member   |
| Issued 12/01/2006  | Do Not Tape or Staple  | 200702006859   |

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