| No. W 15550 | | Due no later than Jun 30, 2011 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------------|--|---------------------------------------|--|--|---------|-------------|--|
| Return to: | | Annual Report Form | | Description of the second of t | EILEEN ANN MCDEVITT/ATTY 752 FALLS VIEW TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. XTREME MOTOR SPORTS & RV LLC WAYDE STANGER 1168 E. 990 S. EDEN ID 83325 | | TWIN FALLS | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| 4. Limited Liability Comp | anies: Enter Na | mes and Address | es of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | MARK W S | TANGER | 3728 N 3700 E | KIMBERLY | ID | USA | 83341 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: W | | Date: 04/14/2011 | | | | |
| W 15550 | | Name (type o | | Title: Manager | | | | |
| Processed 04/14/2011 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |