

No. W 35241	Due no later than Dec 31, 2010 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SIMPSON LEASING, LLC JENNY J TROCK PO BOX 363 OROFINO ID 83544 USA		LONNIE E SIMPSON 217 COLLEGE AVE STE 5 OROFINO ID 83544			
			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	LONNIE E SIMPSON	8427 CAVENDISH HWY	LENORE	ID	USA	83541
MEMBER	SHANNON D SIMPSON	8427 CAVENDISH HWY	LENORE	ID	USA	83541
5. Organized Under the Laws of: ID W 35241	6. Annual Report must be signed.* Signature: Lonnie E. Simpson Name (type or print): Lonnie E. Simpson		Date: 10/08/2010 Title: Member			
Processed 10/08/2010		* Electronically provided signatures are accepted as original signatures.				