


No. W 18035	Due no later than Feb 28, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JAMES P SPECK 120 EAST AVE KETCHUM ID 83340																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. POINT OF ROCKS RANCH, L.L.C. PO BOX 9320 114 WALL ST KETCHUM ID 83340		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>JOHN K. FRENCH</td> <td>PO BOX 9320</td> <td>KETCHUM, ID</td> <td>USA</td> <td></td> <td>83340</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	JOHN K. FRENCH	PO BOX 9320	KETCHUM, ID	USA		83340	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	JOHN K. FRENCH	PO BOX 9320	KETCHUM, ID	USA		83340																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 18035</div>		6. Signature:  <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-weight: bold;">JOHN K. FRENCH</div> </div> <div style="width: 35%;"> Date: 1/17/2013 Title: <div style="border-bottom: 1px solid black; padding-bottom: 5px; font-weight: bold;">MANAGER</div> </div> </div>																																				