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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------|---------|-------------|--|
| No. <b>W 26364</b>                                                                                                                                     |                       | <b>Due no later than Oct 31, 2009</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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ATG LLC<br>HAL J ADAMS<br>7292 CULEBRA RIO CIR<br>IDAHO FALLS ID 83406<br>USA |             | HAL J ADAMS<br>7292 CULEBRA RIO CIRCLE<br>IDAHO FALLS ID 83406 |         |             |  |
|                                                                                                                                                        |                       |                                                                                                                                                                                 |             | 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 |  |
| MANAGER                                                                                                                                                | MASADA MANAGEMENT INC | 7292 CULEBRA RIO CIR                                                                                                                                                            | IDAHO FALLS | ID                                                             | USA     | 83406       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 26364</b>                                                                                           |                       | 6. Annual Report must be signed.*<br>Signature: Hal Adams<br>Name (type or print): Hal Adams                                                                                    |             |                                                                |         |             |  |
|                                                                                                                                                        |                       | Date: 10/21/2009<br>Title: Manager                                                                                                                                              |             |                                                                |         |             |  |
| Processed 10/21/2009                                                                                                                                   |                       | * Electronically provided signatures are accepted as original signatures.                                                                                                       |             |                                                                |         |             |  |