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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 44035</b>                                                                                                                                     |                 | <b>Due no later than Oct 31, 2010</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>                                                                                                                 |            | CLINT SCHNOOR<br>1901 TAMARACK LOOP<br>TWIN FALLS ID 83301 |         |             |  |
|                                                                                                                                                        |                 | <b>1. Mailing Address: Correct in this box if needed.</b>                                                                                 |            | 3. <u>New</u> Registered Agent Signature:*                 |         |             |  |
|                                                                                                                                                        |                 | MAGELLAN CAPITAL MANAGEMENT LLC<br>1901 TAMARACK LOOP<br>TWIN FALLS ID 83301<br>USA                                                       |            |                                                            |         |             |  |
| 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                                                                                                                                                 | CLINT SCHNOOR   | 1901 TAMARACK LOOP                                                                                                                        | TWIN FALLS | ID                                                         | USA     | 83301       |  |
| MEMBER                                                                                                                                                 | SHAWN BROADBENT | 2576 CARRIAGE WAY                                                                                                                         | TWIN FALLS | ID                                                         | USA     | 83301       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 44035</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Clint Schnoor<br>Name (type or print): Clint Schnoor<br>Date: 09/07/2010<br>Title: Member |            |                                                            |         |             |  |
| Processed 09/07/2010                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                 |            |                                                            |         |             |  |