No. C 48827	Due no later than Jan 31, 2010		P.O. BOX	2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL K BRANSTETTER 416 RIVER ST WALLACE ID 83873			
Return to: Annual Re		ort Form	MICHAE				
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	HULL & BRANSTETTER	Mailing Address: Correct in this box if needed. JLL & BRANSTETTER CHARTERED ICHAEL K BRANSTETTER O BOY 709					
NO FILING FEE IF RECEIVED BY DUE DATE	WALLACE ID 83873		3. <u>New</u> Regis	3. <u>New</u> Registered Agent Signature.			
4. Corporations: Enter Nam Office Held Nam	es and Business Addresses of Pr ne Stro	resident, Secretary, Directo eet or PO Address	rs and(optional) City	Treasure State		ostal Code	
President: Micha Secretary: Patti	el K. Branstetter W. Kromer	P.O. Box 709 P.O. Box 709	Wallace Wallace	ID ID	Shoshone Shoshone		
Director: Micha	el K. Branstetter	P.O. Box 709	Wallace	ID	Shoshone	83873	
5. Organized Under the Lav	vs of: 6. Signature: Mul	Cal K. Bi	and	-	Date: //	13/09	
C 48827	Name (type or print):	ne(type or print): Michael K. Branste			tter Title: President		
Issued 11/09/2009 by SL1					2010	01000369	
					PA 4		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the Corporation is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the Corporation to terminate the legal existance. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED