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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------|---------------------|
| No. <b>W 49301</b>                                                                                                                                     |                   | <b>Due no later than Apr 30, 2007</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>PURE TORCHER, LLC<br>C/O LIESCHE & REAGAN PA<br>1044 NORTHWEST BLVD STE D<br>COEUR D ALENE ID 83814 |               | MICHAEL E REAGAN<br>1044 NORTHWEST BLVD STE D<br>COEUR D ALENE ID 83814 |                     |
|                                                                                                                                                        |                   |                                                                                                                                                                                                       |               | 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                                                                                                                                                 | JOANNA MONTGOMERY | 3003 E HAYDEN VIEW DR                                                                                                                                                                                 | COEUR D ALENE | ID                                                                      | 83815               |
| 5. Organized Under the Laws of:<br><br><b>IDAHO<br/>W 49301</b>                                                                                        |                   | 6. Annual Report must be signed.*<br>Signature: MICHAEL E REAGAN<br>Name (type or print): MICHAEL E REAGAN<br>Date: 04/10/2007<br>Title: REG AGENT                                                    |               |                                                                         |                     |
| Processed 04/10/2007                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                                             |               |                                                                         |                     |