

|  |                |   |        |   |                     |
|--|----------------|---|--------|---|---------------------|
| No. <b>W 42227</b>   |                | Due no later than Aug 31, 2006  |        | 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>WINGWORKS LLC<br>ROBERT T. WELSH<br>PO BOX 367<br>115 W. BULLION ST.<br>HAILEY ID 83333 |        | ROBERT T WELSH<br>115 W BULLION ST<br>HAILEY ID 83333 |                     |
|  |                |   |        | 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  | ROBERT T WELSH | PO BOX 367  | HAILEY | ID  | 83333               |
| 5. Organized Under the Laws of:<br><br><b>IDAHO<br/>W 42227</b>  |                | 6. Annual Report must be signed.*<br>Signature: Robert T. Welsh<br>Name (type or print): Robert T. Welsh<br>Date: 08/28/2006<br>Title: Manager  |        |   |                     |
| Processed 08/28/2006   |                | * Electronically provided signatures are accepted as original signatures.   |        |   |                     |