

No. W 40768	Due no later than June 30, 2008		2. Registered Agent and Office NO PO BOX										
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address - Correct in this box, if applicable MAGNUSON UN LIMITED CO. H JAMES MAGNUSON PO BOX 2288 COEUR D ALENE, ID 83816		H JAMES MAGNUSON 1250 NORTHWOOD CENTER CT COEUR D ALENE, ID 83814 3. New Registered Agent Signature									
		4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>H James Magnuson</td> <td>Box 2298</td> <td>Coeur d'Alene</td> <td>ID</td> <td>83816</td> </tr> </tbody> </table>		Office held	Name	Street or P.O. Address	City	State	Zip	Manager	H James Magnuson	Box 2298	Coeur d'Alene
Office held	Name	Street or P.O. Address	City	State	Zip								
Manager	H James Magnuson	Box 2298	Coeur d'Alene	ID	83816								
5. Organized Under the Laws of: IDAHO W 40768		6. Signature <u>H J Magnuson</u> Date <u>4-10-09</u> Name (Typed or Printed) <u>H James Magnuson</u> Title <u>Manager</u>											

Issued 04/01/2008

Do Not Tape or Staple

200806007073