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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------|---------|-------------|--|
| No. <b>W 63245</b>                                                                                                                                     |                   | <b>Due no later than Jun 30, 2009</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>DONNELLY CABINS, LLC.<br>CHRISTOPHER R HAYES<br>PO BOX 208<br>MERIDIAN ID 83680 |          | CHRISTOPHER HAYES<br>280 N BALTIC PLACE<br>MERIDIAN ID 83642 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                                                   |          | 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                                                                                                                                                | CHRISTOPHER HAYES | PO BOX 208                                                                                                                                                                        | MERIDIAN | ID                                                           | USA     | 83680       |  |
| MANAGER                                                                                                                                                | LANCE RACKHAM     | PO BOX 208                                                                                                                                                                        | MERIDIAN | ID                                                           | USA     | 83680       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 63245</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: Christopher Hayes<br>Name (type or print): Christopher Hayes                                                                      |          |                                                              |         |             |  |
|                                                                                                                                                        |                   | Date: 04/14/2009<br>Title: Manager                                                                                                                                                |          |                                                              |         |             |  |
| Processed 04/14/2009                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                         |          |                                                              |         |             |  |