

|  |                         |   |       |  |         |                  |  |
|--|-------------------------|---|-------|--|---------|------------------|--|
| No. <b>C 177230</b>  |                         | <b>Due no later than Feb 28, 2011</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>1. Mailing Address: Correct in this box if needed.</b><br><br>LAKE FORK STUDIOS, INC.<br>CHRISTINE EVANGELIDES<br>PO BOX 2590<br>MCCALL ID 83638 |       | CHRISTINE A EVANGELIDES DODD<br>5904 N. TAPESTRY WAY<br>BOISE ID 83713 |         |                  |  |
|  |                         |   |       | 3. <u>New</u> Registered Agent Signature:*                             |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                         |   |       |  |         |                  |  |
| Office Held  | Name                    | Street or PO Address  | City  | State  | Country | Postal Code      |  |
| PRESIDENT  | CHRISTINE A EVANGELIDES | 5904 N. TAPESTRY WAY  | BOISE | ID   | USA     | 83713            |  |
| 5. Organized Under the Laws of:  |                         | 6. Annual Report must be signed.*   |       |  |         |                  |  |
| <b>ID<br/>C 177230</b>   |                         | Signature: Christine Evangelides  |       |  |         | Date: 12/21/2010 |  |
|  |                         | Name (type or print): Christine Evangelides   |       |  |         | Title: President |  |
| Processed 12/21/2010   |                         | * Electronically provided signatures are accepted as original signatures.   |       |  |         |                  |  |