

|                                                                                                                                                        |                 |                                                                                |       |                                                          |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------|-------|----------------------------------------------------------|------------------|-------------|--|
| No. <b>W 36239</b>                                                                                                                                     |                 | <b>Due no later than Jan 31, 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>Annual Report Form</b>                                                      |       | DONALD J FARLEY<br>702 W IDAHO STE 700<br>BOISE ID 83702 |                  |             |  |
|                                                                                                                                                        |                 | <b>1. Mailing Address: Correct in this box if needed.</b>                      |       | 3. <u>New</u> Registered Agent Signature:*               |                  |             |  |
|                                                                                                                                                        |                 | BRADLEY B., LLC<br>DUANE A SESSIONS<br>2777 S ORCHARD<br>BOISE ID 83707<br>USA |       |                                                          |                  |             |  |
| 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                                                                                                                                                | DENNIS E DILLON | 1026 W TWO RIVERS LN                                                           | EAGLE | ID                                                       | USA              | 83616       |  |
| MANAGER                                                                                                                                                | BRAD B DILLON   | 2777 S ORCHARD ST                                                              | BOISE | ID                                                       | USA              | 83705       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                              |       |                                                          |                  |             |  |
| <b>ID<br/>W 36239</b>                                                                                                                                  |                 | Signature: Duane A Sessions                                                    |       |                                                          | Date: 12/14/2010 |             |  |
|                                                                                                                                                        |                 | Name (type or print): Duane A Sessions                                         |       |                                                          | Title: Vp/cfo    |             |  |
| Processed 12/14/2010                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.      |       |                                                          |                  |             |  |