

|   |                   |   |  |  |             |                |                      |
|---|-------------------|---|--|--|-------------|----------------|----------------------|
| No. <b>W 82955</b>  |                   | <b>Due no later than Apr 30, 2010</b><br><b>Annual Report Form</b>  |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080  |                   | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MARY LOU'S GARDEN CENTER LLC<br>LISA FUNK<br>201 NANCY DR<br>BURLEY ID 83318 |  | LISA FUNK<br>201 NANCY DR<br>BURLEY ID 83318         |             |                |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>  |                   |   |  | 3. <u>New</u> Registered Agent Signature:*           |             |                |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.        |                   |   |  |  |             |                |                      |
| Office Held<br>MANAGER  | Name<br>LISA FUNK | Street or PO Address<br>201 NANCY DR  |  | City<br>BURLEY                                       | State<br>ID | Country<br>USA | Postal Code<br>83318 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 82955</b>                                  |                   | 6. Annual Report must be signed.*<br><br>Signature: Lisa Funk<br>Name (type or print): Lisa Funk<br><br>Date: 04/28/2010<br>Title: Owner      |  |  |             |                |                      |
| Processed 04/28/2010      * Electronically provided signatures are accepted as original signatures. |                   |   |  |  |             |                |                      |