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|--|---------------------|---|-----------|---|------------------|-------------|--|
| No. W 10538 | | Due no later than Dec 31, 2007 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form | | THOMAS E GATES 10607 SILVER FOX CT BOISE ID 83709 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | DOUBLE THOMAS E GATES 8055 FOX TAIL WAY BOISE ID 83709 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 | |
| MEMBER | KARI J KARREN GATES | 8055 FOX TAIL WAY | BOISE | ID | USA | 83709 | |
| MEMBER | THOMAS E GATES | 8055 FOX TAIL WAY | BOISE | ID | USA | 83709 | |
| MEMBER | JOSHUA T GATES | 2687 LAUREN CREEK LOOP | ANCHORAGE | AK | USA | 99507 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 10538 | | Signature: Thomas E. Gates | | | Date: 12/25/2007 | | |
| | | Name (type or print): Thomas E. Gates | | | Title: Member | | |
| Processed 12/25/2007 | | * Electronically provided signatures are accepted as original signatures. | | | | | |