

|   |                    |  |  |  |       |         |             |
|---|--------------------|--|--|--|-------|---------|-------------|
| No. <b>W 24441</b>  |                    | <b>Due no later than May 31, 2014</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>BIRCH TREE PROPERTIES, L.L.C.<br>MICHAEL E COATS, MD<br>2841 EAST PACKSADDLE DRIVE<br>COEUR D'ALENE ID 83815<br>USA |  | MICHAEL E COATS MD<br>2841 EAST PACKSADDLE DRIVE<br>COEUR D'ALENE ID 83815 |       |         |             |
| <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   | Name               | Street or PO Address   |  | City   | State | Country | Postal Code |
| MANAGER   | MICHAEL E COATS MD | 2841 EAST PACKSADDLE DRIVE   |  | COEUR D'ALENE  | ID    | USA     | 83815       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 24441</b>                                  |                    | 6. Annual Report must be signed.*<br><br>Signature: Michael Coats<br>Name (type or print): Michael Coats<br><br>Date: 06/18/2014<br>Title: Manager                                   |  |  |       |         |             |
| Processed 06/18/2014      * Electronically provided signatures are accepted as original signatures. |                    |  |  |  |       |         |             |