

No. W 50366		Due no later than May 31, 2012		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 1. Mailing Address: Correct in this box if needed. KAROL WARD & CO. LLC KAROL WARD PO BOX 1522 HAILEY ID 83333		KAROL WARD 1410 BLUE LAKE DR HAILEY ID 83333	
				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	KAROL WARD	PO BOX 1522	HAILEY	ID	USA 83333
5. Organized Under the Laws of: ID W 50366		6. Annual Report must be signed.* Signature: Karol A Ward Name (type or print): Karol A Ward Date: 06/07/2012 Title: Manager			
Processed 06/07/2012		* Electronically provided signatures are accepted as original signatures.			