

No. W 23819		Due no later than Apr 30, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. J C WILSON, L.L.C. JEANNE C WILSON 3317 OREGON TRAIL DR KIMBERLY ID 83341 USA		JEANNE WILSON 3317 OREGON TRAIL DR KIMBERLY ID 83341			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name JEANNE WILSON	Street or PO Address 1360 GALENA DR		City TWIN FALLS	State ID	Country USA	Postal Code 83301
5. Organized Under the Laws of: ID W 23819		6. Annual Report must be signed.* Signature: Jeanne C Wilson Name (type or print): Jeanne C Wilson Date: 02/10/2010 Title: Manager					
Processed 02/10/2010 * Electronically provided signatures are accepted as original signatures.							