

|                                                                                                                                                        |             |                                                                                                                                                                               |      |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 45529</b>                                                                                                                                     |             | <b>Due no later than Dec 31, 2011</b>                                                                                                                                         |      | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |             | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>GLEED TRUCKING, LLC<br>ROY M GLEED<br>227 LANARK RD<br>OVID ID 83254<br>USA |      | ROY M GLEED<br>227 LANARK RD<br>OVID ID 83254-4923 |         |                  |  |
|                                                                                                                                                        |             |                                                                                                                                                                               |      | 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                                                                                                                                                | ROY M GLEED | 227 LANARK RD                                                                                                                                                                 | OVID | ID                                                 | USA     | 83254            |  |
| 5. Organized Under the Laws of:                                                                                                                        |             | 6. Annual Report must be signed.*                                                                                                                                             |      |                                                    |         |                  |  |
| <b>ID<br/>W 45529</b>                                                                                                                                  |             | Signature: Roy M Gleed                                                                                                                                                        |      |                                                    |         | Date: 12/08/2011 |  |
|                                                                                                                                                        |             | Name (type or print): Roy M Gleed                                                                                                                                             |      |                                                    |         | Title: Manager   |  |
| Processed 12/08/2011                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                                     |      |                                                    |         |                  |  |