

|  |             |   |            |  |                     |
|--|-------------|---|------------|--|---------------------|
| No. <b>W 10952</b>   |             | <b>Due no later than Jan 31, 2007</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>FEDERATION POINTE, L.L.C.<br>J FRANCIS FLORENCE<br>PO BOX 5491<br>TWIN FALLS ID 83303 |            | TOI, L.L.C.<br>139 RIVER VISTA PL<br>TWIN FALLS ID 83301 |                     |
|  |             |   |            | 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  | TOI, L.L.C. | P O BOX 5491  | TWIN FALLS | ID   | 83303               |
| 5. Organized Under the Laws of:<br><br><b>IDAHO<br/>W 10952</b>  |             | 6. Annual Report must be signed.*<br>Signature: J. Francis Florence<br>Name (type or print): J. Francis Florence<br>Date: 11/07/2006<br>Title: TOI-Managing 'Member                     |            |  |                     |
| Processed 11/07/2006   |             | * Electronically provided signatures are accepted as original signatures.   |            |  |                     |