| No. W 46242 | Due no later than January 31, 2008 |
|--|--|
| | Annual Report Form 2. Registered Agent and Office NO PO BO |
| Return to: SECRETARY OF STATE | 5 1. Mailing Address - Correct in this harman KENT E CARLSON |
| 450 NORTH FOURTH STREET | CARLSON SCHOLARSUNDS A THIS BOX A Applicable 220 S HANSON AVE |
| PO BOX 83720 | PO BOX 515 |
| BOISE, ID 83720-0080 | SHELLEY, ID 83274 |
| • 1 | |
| NO FILING FEE IF | 3. New Registered Agent Signature |
| RECEIVED BY DUE DATE | |
| Limited Liability Compar | ies: Enter Names and Addresses of Managers. |
| · | |
| Office held Name | Street or P.O. Address City State Zin |
| Manager Kent EC | Street of P.O. Address State City State Zip State John P.O. Boy 515 She (ley ID 83274) |
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| Organized Under the Laws of: IDAHO | 6. 1000 |
| W 46242 | Signature Sent Carlon no Par 10 and |
| ₩ 40242 | V + 5 0 |
| | Name Cypesor Kewit & Care Care Man |
| | THO THE TO CAPTE OF THE |
| ssued 11/01/2007 | Signature Sent E Carlson Date Dec 10, 2007 Name Printed or Kent E Carlson Title Manager Do Not Tape or Staple 200801008120 |

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