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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 53668</b>                                                                                                                                     |                  | <b>Due no later than Aug 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>1. Mailing Address: Correct in this box if needed.</b><br>MOUNTAIN RIDGE ESTATES, LLC<br>JAY PAUL JOHNSON<br>329 S WOODRUFF AVE<br>IDAHO FALLS ID 83401 |             | JAY PAUL JOHNSON<br>3539 BRIAR CREEK LANE STE E<br>IDAHO FALLS ID 83406 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                            |             | 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 |  |
| MEMBER                                                                                                                                                 | GREG HANSEN      | 3539 BRIAR CREEK LANE STE E                                                                                                                                | IDAHO FALLS | ID                                                                      | USA     | 83401       |  |
| MEMBER                                                                                                                                                 | SHON DENNING     | 3539 BRIAR CREEK LANE STE E                                                                                                                                | IDAHO FALLS | ID                                                                      | USA     | 83406       |  |
| MANAGER                                                                                                                                                | JAY PAUL JOHNSON | 3539 BRIAR CREEK LANE STE E                                                                                                                                | IDAHO FALLS | ID                                                                      | USA     | 83406       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>W 53668</b>                                                                                               |                  | 6. Annual Report must be signed.*<br>Signature: Jay Paul Johnson<br>Name (type or print): Jay Paul Johnson                                                 |             |                                                                         |         |             |  |
| Date: 06/13/2011<br>Title: Manager                                                                                                                     |                  |                                                                                                                                                            |             |                                                                         |         |             |  |
| Processed 06/13/2011                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                  |             |                                                                         |         |             |  |