| No. W 80190 | | Due no later than Dec 31, 2009 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|--------------------------|--|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. INNERCOMPASS LLC KIM MARSHALL 1213 ELM ST SANDPOINT ID 83864 | 1213 ELM ST SANDPOINT | KIM MARSHALL 1213 ELM ST SANDPOINT ID 83864 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 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 KIM MARSHAL | | ALL 1213 ELM ST. | SANDPOINT | ID | USA | 83864 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Kimberley A. Marshall | | Date: 12/15/2009 | | | |
| W 80190 | | Name (type or print): Kimberley A. Marshall | | Title: Principal | | | |
| Processed 12/15/2009 * Electronically provided signatures are accepted as original signatures. | | | | | | | |