

|  |                   |  |            |  |                  |             |  |
|--|-------------------|--|------------|--|------------------|-------------|--|
| No. <b>C 114689</b>  |                   | <b>Due no later than Apr 30, 2010</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>  |            | CRAIG D HOLMAN<br>496-B SHOUP AVE W<br>TWIN FALLS ID 83301 |                  |             |  |
|  |                   | <b>1. Mailing Address: Correct in this box if needed.</b>  |            | 3. <u>New</u> Registered Agent Signature:*                 |                  |             |  |
|  |                   | CRAIG D. HOLMAN, CHARTERED<br>CRAIG D HOLMAN<br>496-B SHOUP AVE W<br>TWIN FALLS ID 83301-5043<br>USA |            |  |                  |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                   |  |            |  |                  |             |  |
| Office Held  | Name              | Street or PO Address   | City       | State  | Country          | Postal Code |  |
| SECRETARY  | CHERYLYN R HOLMAN | 496-B SHOUP AVE WEST   | TWIN FALLS | ID   | USA              | 83301-5043  |  |
| PRESIDENT  | CRAIG D HOLMAN    | 496-B SHOUP AVE WEST   | TWIN FALLS | ID   | USA              | 83301-5043  |  |
| 5. Organized Under the Laws of:  |                   | 6. Annual Report must be signed.*  |            |  |                  |             |  |
| <b>ID<br/>C 114689</b>   |                   | Signature: Craig D Holman  |            |  | Date: 05/07/2010 |             |  |
|  |                   | Name (type or print): Craig D Holman   |            |  | Title: President |             |  |
| Processed 05/07/2010   |                   | * Electronically provided signatures are accepted as original signatures.                            |            |  |                  |             |  |