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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------|---------|-------------|--|
| No. <b>C 80734</b>                                                                                                                                     |                                        | Due no later than Mar 31, 2009<br><b>Annual Report Form</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>FOUR SQUARE GOLD MINES, INC.<br>ESTATE OF JOHN A HERN, JR.<br>PO BOX 3469<br>COEUR D'ALENE ID 83816 |               | JOHN F MAGNUSON<br>1250 NORTHWOOD CENTER CT<br>STE A<br>COEUR D'ALENE ID 83814 |         |             |  |
|                                                                                                                                                        |                                        |                                                                                                                                                                  |               | 3. <u>New</u> Registered Agent Signature:*                                     |         |             |  |
| 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 |  |
| PRESIDENT                                                                                                                                              | JOHN F. MAGNUSON, PERSONAL REPRESENTAT | P. O. BOX 3469                                                                                                                                                   | COEUR D'ALENE | ID                                                                             | USA     | 83816       |  |
| SECRETARY                                                                                                                                              | JOHN F. MAGNUSON, PERSONAL REPRESENTAT | P.O. BOX 3469                                                                                                                                                    | COEUR D'ALENE | ID                                                                             | USA     | 83816       |  |
| DIRECTOR                                                                                                                                               | JOHN F. MAGNUSON, PERSONAL REPRESENTAT | P.O. BOX 3469                                                                                                                                                    | COEUR D'ALENE | ID                                                                             | USA     | 83816       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>C 80734</b>                                                                                               |                                        | 6. Annual Report must be signed.*<br>Signature: John F. Magnuson<br>Name (type or print): John F. Magnuson                                                       |               |                                                                                |         |             |  |
|                                                                                                                                                        |                                        | Date: 01/15/2009<br>Title: Personal Representative                                                                                                               |               |                                                                                |         |             |  |
| Processed 01/15/2009                                                                                                                                   |                                        | * Electronically provided signatures are accepted as original signatures.                                                                                        |               |                                                                                |         |             |  |