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| No. W 39589 | Due no later than May 31, 2011 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. | | ROBERT KORB 128 SADDLE RD STE 103 KETCHUM ID 83340 | | | |
| | B.C. EXCHANGE ACCOMMODATION TITLEHOLDER VII, LLC ROBERT KORB PO BOX 249 KETCHUM ID 83340-0249 | | 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 | B.C. EXCHANGE CORPORATION | PO BOX 249 | KETCHUM | ID | USA | 83340-0249 |
| 5. Organized Under the Laws of: ID W 39589 | | 6. Annual Report must be signed.* Signature: Robert Korb Name (type or print): Robert Korb | | Date: 03/17/2011 Title: Member | | |
| Processed 03/17/2011 | | * Electronically provided signatures are accepted as original signatures. | | | | |