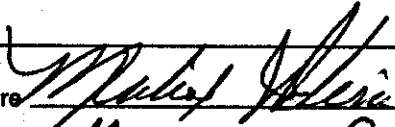


No. C 130121	Due no later than August 31, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX																			
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		MICHAEL J PARKINS 519 MARION SANDPOINT, ID 83864																			
	FOUR SEASONS ENTERPRISES, INC. 519 MARION SANDPOINT, ID 83864		3. New Registered Agent Signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>MICHAEL J. PARKINS</td> <td>519 MARION</td> <td>SANDPOINT ID</td> <td></td> <td>83864</td> </tr> <tr> <td>Secy.</td> <td>SUSAN L. PARKINS</td> <td>519 MARION</td> <td>SANDPOINT ID</td> <td></td> <td>83864</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	MICHAEL J. PARKINS	519 MARION	SANDPOINT ID		83864	Secy.	SUSAN L. PARKINS	519 MARION	SANDPOINT ID		83864
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Secy.	SUSAN L. PARKINS	519 MARION	SANDPOINT ID		83864																	
5. Organized Under the Laws of: IDAHO C 130121		6. Signature  Date 7-7-07 Name (Typed or Printed) MICHAEL J. PARKINS Title PRES																				

Issued 06/01/2007

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