

|                                                                                                                                                        |                                      |                                                                                                                                                                                                                   |       |                                                               |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>L 4829</b>                                                                                                                                      |                                      | <b>Due no later than Mar 31, 2011</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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>RALPH AND JUNE RICKETTS FAMILY LIMITED PARTNERSHIP<br>ROBERT J RICKETTS<br>1897 N GOLFVIEW WAY<br>MERIDIAN ID 83646 |       | ROBERT J RICKETTS<br>1897 N GOLFVIEW WAY<br>MERIDIAN ID 83646 |         |             |  |
|                                                                                                                                                        |                                      |                                                                                                                                                                                                                   |       | 3. <u>New</u> Registered Agent Signature:*                    |         |             |  |
| Office Held                                                                                                                                            | Name                                 | Street or PO Address                                                                                                                                                                                              | City  | State                                                         | Country | Postal Code |  |
| GENERAL PARTNER                                                                                                                                        | RALPH AND JUNE RICKETTS LIVING TRUST | 16803 N KETTING LN                                                                                                                                                                                                | NAMPA | ID                                                            | USA     | 83687       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>L 4829</b>                                                                                            |                                      | 6. Annual Report must be signed.*<br>Signature: Robert J. Ricketts<br>Name (type or print): Robert J. Ricketts                                                                                                    |       |                                                               |         |             |  |
| Processed 01/14/2011                                                                                                                                   |                                      | Date: 01/14/2011<br>Title: Registered Agent                                                                                                                                                                       |       |                                                               |         |             |  |
| * Electronically provided signatures are accepted as original signatures.                                                                              |                                      |                                                                                                                                                                                                                   |       |                                                               |         |             |  |