

|  |              |   |        |  |         |             |  |
|--|--------------|---|--------|--|---------|-------------|--|
| No. <b>W 4354</b>  |              | <b>Due no later than Jul 31, 2009</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>MOUNTAIN SPRINGS RANCH LLC<br>MARY H JAFFE<br>MOUNTAIN SPRINGS RANCH LLC<br>5550 BARTON FLAT ROAD<br>MACKAY ID 83251<br>USA |        | CT CORPORATION SYSTEM<br>1111 W JEFFERSON STE 530<br>BOISE ID 83702<br>USA |         |             |  |
|  |              |   |        | 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 |  |
| MANAGER  | MARY H JAFFE | MOUNTAIN SPRINGS RANCH LLC 5550<br>BARTON FLAT ROAD   | MACKAY | ID   | USA     | 83251       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 4354</b>  |              | 6. Annual Report must be signed.*<br>Signature: Mary H. Jaffe<br>Name (type or print): Mary H. Jaffe  |        |  |         |             |  |
| Date: 08/14/2009<br>Title: Manager   |              |   |        |  |         |             |  |
| Processed 08/14/2009   |              | * Electronically provided signatures are accepted as original signatures.   |        |  |         |             |  |