

|                                                                                                                                                        |                      |                                                                                                                                                                                    |             |                                                                   |         |                         |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------|---------|-------------------------|--|
| No. <b>W 56491</b>                                                                                                                                     |                      | <b>Due no later than Nov 30, 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><br>QWKPHONE, LLC<br>QUINN WHIPPLE<br>1300 S YELLOWSTONE HWY<br>IDAHO FALLS ID 83402 |             | R QUINN WHIPPLE<br>1300 S YELLOWSTONE HWY<br>IDAHO FALLS ID 83402 |         |                         |  |
|                                                                                                                                                        |                      |                                                                                                                                                                                    |             | 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                                                                                                                                                 | QWK.NET HOSTING, LLC | 1300 S YELLOWSTONE HWY                                                                                                                                                             | IDAHO FALLS | ID                                                                | USA     | 83402                   |  |
| 5. Organized Under the Laws of:                                                                                                                        |                      | 6. Annual Report must be signed.*                                                                                                                                                  |             |                                                                   |         |                         |  |
| <b>ID<br/>W 56491</b>                                                                                                                                  |                      | Signature: R. Quinn Whipple                                                                                                                                                        |             |                                                                   |         | Date: 10/16/2009        |  |
|                                                                                                                                                        |                      | Name (type or print): R. Quinn Whipple                                                                                                                                             |             |                                                                   |         | Title: Registered Agent |  |
| Processed 10/16/2009                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                                          |             |                                                                   |         |                         |  |