

No. W 15483	Due no later than May 31, 2012 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.		SONJA O HEAD 1850 SKUNK SPRINGS LANE VICTOR ID 83455			
	FOX SPRINGS LLC SONJA HEAD O. HEAD PO BOX 140 VICTOR ID 83455 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	SONJA O HEAD	PO BOX 140 1850 SKUNK SPRINGS LANE	VICTOR	ID	USA	83455-0140
MANAGER	KITCHENER E. HEAD	PO BOX 140 1850 SKUNK SPRINGS LANE	VICTOR	ID	USA	83455-0140
5. Organized Under the Laws of: ID W 15483		6. Annual Report must be signed.* Signature: Sonja Haead Name (type or print): Sonja Haead Date: 03/24/2012 Title: Manager				
Processed 03/24/2012		* Electronically provided signatures are accepted as original signatures.				