

|                                                                                                                                                        |                   |                                                                                                                                                                              |            |                                                               |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------|---------|------------------|--|
| No. <b>C 167419</b>                                                                                                                                    |                   | <b>Due no later than Jun 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>TKC, INC.<br>PETE PRIGGE<br>651 RESERVATION LINE RD<br>COTTONWOOD ID 83522 |            | PETE PRIGGE<br>651 RESERVATION LINE RD<br>COTTONWOOD ID 83522 |         |                  |  |
|                                                                                                                                                        |                   |                                                                                                                                                                              |            | 3. <u>New</u> Registered Agent Signature:*                    |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                   |                                                                                                                                                                              |            |                                                               |         |                  |  |
| Office Held                                                                                                                                            | Name              | Street or PO Address                                                                                                                                                         | City       | State                                                         | Country | Postal Code      |  |
| PRESIDENT                                                                                                                                              | PETER TODD PRIGGE | 651 RESERVATION LINE RD                                                                                                                                                      | COTTONWOOD | ID                                                            | USA     | 83522            |  |
| SECRETARY                                                                                                                                              | LEAH M PRIGGE     | 651 RESERVATION LINE RD                                                                                                                                                      | COTTONWOOD | ID                                                            | USA     | 83522            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                                                                                                            |            |                                                               |         |                  |  |
| <b>ID<br/>C 167419</b>                                                                                                                                 |                   | Signature: Leah Prigge                                                                                                                                                       |            |                                                               |         | Date: 07/13/2009 |  |
|                                                                                                                                                        |                   | Name (type or print): Leah Prigge                                                                                                                                            |            |                                                               |         | Title: Secretary |  |
| Processed 07/13/2009                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                    |            |                                                               |         |                  |  |