| No. W 41229  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE |                    | Due no later than Jul 31, 2011 Annual Report Form  1. Mailing Address: Correct in this box if needed.  SMITH & COELHO OF VALLEY COUNTY, LLC JEAN G CARIAGA 1151 E IRON EAGLE DR EAGLE ID 83616 |                                      | 2. Registered         | 2. Registered Agent and Address (NO PO BOX)  JUDSON B MONTGOMERY  601 W BANNOCK  BOISE ID 83702  3. New Registered Agent Signature:* |         |             |  |
|---|--------------------|--|--------------------------------------|-----------------------|--|---------|-------------|--|
|   |                    |  |                                      | 601 W BAN<br>BOISE ID |  |         |             |  |
| 4. Limited Liability Co   | mpanies: Enter Nar | nes and Addresse   | s of at least one Member or Manager. | •                     |  |         |             |  |
| Office Held   | Name               |  | Street or PO Address                 | City                  | State  | Country | Postal Code |  |
| MANAGER   | LARRY COEL         | _HO  | 1151 E. IRON EAGLE DRIVE             | EAGLE                 | ID   | USA     | 83616       |  |
| MANAGER   | MANAGER STEVE SMIT |  | 1151 E IRON EAGLE DRIVE              | EAGLE                 | ID   | USA     | 83616       |  |
| MANAGER   | NAGER JEAN CARIA   |  | 1151 E IRON EAGLE DRIVE              | EAGLE                 | ID   | USA     | 83616       |  |
| MANAGER   | GEORGIA MA         | ACKLEY   | 1151 E IRON EAGLE DRIVE              | EAGLE                 | ID   | USA     | 83616       |  |
| 5. Organized Under the Laws of:   |                    | 6. Annual Report must be signed.*  |                                      |                       |  |         |             |  |
| ID<br>W 41229   |                    | Signature: Jean Cariaga  |                                      |                       | Date: 06/06/2011   |         |             |  |
|   |                    | Name (type or print): Jean Cariaga   |                                      | Title: Manager        |  |         |             |  |
| Processed 06/06/201   | 1                  | * Electronically provided signatures are accepted as original signatures.  |                                      |                       |  |         |             |  |