

|  |  |   |   |       |         |             |
|--|--|---|---|-------|---------|-------------|
| No. <b>W 57268</b>   | <b>Due no later than Dec 31, 2007</b><br><b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b><br><br>THORNYBUSH OF IDAHO, LLC<br>PO BOX 51630<br>IDAHO FALLS ID 83405-1630 |   | DOUGLAS R NELSON<br>490 MEMORIAL DR STE 200<br>IDAHO FALLS ID 83405 |       |         |             |
|  |  |   | 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  | BLAINE LILJENQUIST   | 1495 CROOKED PINE DR  | MYRTLE BEACH  | SC    | USA     | 29575       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 57268</b>   | 6. Annual Report must be signed.*<br>Signature: Douglas R. Nelson<br>Name (type or print): Douglas R. Nelson                           |   | Date: 01/04/2008<br>Title: Registered Agent                         |       |         |             |
| Processed 01/04/2008   |  | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |