

|  |               |  |        |   |         |             |  |
|--|---------------|--|--------|---|---------|-------------|--|
| No. <b>J 1579</b>  |               | <b>Due no later than Mar 31, 2011</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>FIFTH AVENUE ESTATES, LLP<br>DEBRA S LINDNER<br>15407 WAR EAGLE RD<br>MURPHY ID 83650<br>USA |        | ALAN LINDNER<br>15407 WAR EAGLE RD<br>MURPHY ID 83650 |         |             |  |
|  |               |  |        | 3. <u>New</u> Registered Agent Signature:*            |         |             |  |
| 4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.   |               |  |        |   |         |             |  |
| Office Held  | Name          | Street or PO Address   | City   | State   | Country | Postal Code |  |
| PARTNER  | ALAN LINDNER  | 15407 WAR EAGLE RD   | MURPHY | ID  | USA     | 83650       |  |
| PARTNER  | DEBRA LINDNER | 15407 WAR EAGLE RD   | MURPHY | ID  | USA     | 83650       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>J 1579</b>  |               | 6. Annual Report must be signed.*<br>Signature: Debra S. Lindner<br>Name (type or print): Debra S. Lindner<br>Date: 04/20/2011<br>Title: Partner   |        |   |         |             |  |
| Processed 04/20/2011   |               | * Electronically provided signatures are accepted as original signatures.  |        |   |         |             |  |