

INSTRUCTIONS ON REVERSE SIDE

No. W 1537	Idaho Limited Liability Company Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																					
Return To Secretary of State Room 203, Statehouse P.O. BOX 834200 Boise ID 83720-0080 Forfeited 12/27/1996 REINSTATEMENT FEE \$10.00	Due No Later Than November 1, 1996 1. Mailing Address — Please Correct, If Not Correct QUAKER RIDGE RANCHES, L.L.C. LYNN F WILCOX 4889 S HWY 191 REXBURG ID 83440		LYNN F. WILCOX 4889 S HWY 191 REXBURG ID 83440 3. Organized Under The Laws of ID W 1537																					
Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Lynn Wilcox</td> <td>4889 S. Hwy 191</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> <tr> <td>Eddie Bowen</td> <td>4889 S. Hwy 191</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> <tr> <td>Kevin King</td> <td>4889 S. Hwy 191</td> <td>Rexburg</td> <td>ID</td> <td>83440</td> </tr> </tbody> </table>			Name	Street or P.O. Address	City	State	Zip	Lynn Wilcox	4889 S. Hwy 191	Rexburg	ID	83440	Eddie Bowen	4889 S. Hwy 191	Rexburg	ID	83440	Kevin King	4889 S. Hwy 191	Rexburg	ID	83440	MUST BE PRINTED OR TYPED	
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5. Signature of the Current Registered Agent (if changed in block 2)		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Lynn Wilcox</u> Date <u>12-7-96</u> Name (Typed or Printed)																						