

|                                                                                                                                                        |                |                                                                                                                                                                                     |            |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 7105</b>                                                                                                                                      |                | <b>Due no later than Oct 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><br>PEACH PROPERTIES, LLC<br>BRENDA D PEACH<br>3700 N MEYER RD<br>POST FALLS ID 83854 |            | KARL D PEACH<br>3700 N MEYER RD<br>POST FALLS ID 83854 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                     |            | 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                                                                                                                                                | KARL D PEACH   | 3700 N MEYER RD                                                                                                                                                                     | POST FALLS | ID                                                     | USA     | 83854       |  |
| MANAGER                                                                                                                                                | BRENDA D PEACH | 3700 N MEYER RD                                                                                                                                                                     | POST FALLS | ID                                                     | USA     | 83854       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 7105</b>                                                                                            |                | 6. Annual Report must be signed.*<br>Signature: Brenda Peach<br>Name (type or print): Brenda Peach<br>Date: 08/15/2011<br>Title: Secretary                                          |            |                                                        |         |             |  |
| Processed 08/15/2011                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                           |            |                                                        |         |             |  |