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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 20250</b>                                                                                                                                     |                                          | <b>Due no later than Aug 31, 2010</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>                                                                                                                                           |       | ROALD DOSKELAND<br>7669 W RIVERSIDE DR<br>STE 102<br>BOISE ID 83714 |         |             |  |
|                                                                                                                                                        |                                          | <b>1. Mailing Address: Correct in this box if needed.</b><br>WINDLAND REPOWER PARTNERS, LLC<br>ROALD DOSKELAND<br>7669 W RIVERSIDE DR #102<br>BOISE ID 83714<br>USA |       | 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                                                                                                                                                | ROALD DOSKELAND WINDLAND<br>INCORPORATED | 7669 W RIVERSIDE DRIVE STE 102                                                                                                                                      | BOISE | ID                                                                  | USA     | 83714       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 20250</b>                                                                                           |                                          | 6. Annual Report must be signed.*<br>Signature: Roald Dorskeland<br>Name (type or print): Roald Dorskeland<br>Date: 06/17/2010<br>Title: Managing Partner           |       |                                                                     |         |             |  |
| Processed 06/17/2010                                                                                                                                   |                                          | * Electronically provided signatures are accepted as original signatures.                                                                                           |       |                                                                     |         |             |  |