No. W 53134		Due no	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		to the same of the	CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. A.G. EDWARDS MORTGAGE, LLC ONE HOME CAMPUS MAC X2401-049		1401 SHORELINE DR STE 2 BOISE ID 83702				
		DES MOINES IA 50328		3. New Register	3. New Registered Agent Signature:*			
4. Limited Liability Compan	nies: Enter Nam	nes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER		O VENTURES, LLC OS & SONS, INC	ONE HOME CAMPUS MAC X2401-04 1 NORTH JEFFERSON AVE	9 DES MOINES ST. LOUIS	IA MO	USA USA	50328 63103	
5. Organized Under the Laws of:		6. Annual Report must	be signed.*					
DE W 53134		Signature: Robert Scallon Da		ate: 06/19/2008				
		Name (type or print): Robert Scallon Titl		tle: VP of member WF Ventures, LLC				
Processed 06/19/2008	* Electronically provided signatures are accepted as original signatures.							