

|  |                  |  |            |  |         |                  |  |
|--|------------------|--|------------|--|---------|------------------|--|
| No. <b>W 50859</b>   |                  | Due no later than May 31, 2013<br><b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b><br>KIBBEE WALTON PHOTOGRAPHY, LLC<br>ANTHONY K WALTON<br>2600 E SELTICE WY STE B<br>POST FALLS ID 83854<br>USA |            | ANTHONY K WALTON<br>2600 E SELTICE WY STE B<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      |  |
| MEMBER   | ANTHONY K WALTON | 2600 E SELTICE WY STE B  | POST FALLS | ID   | USA     | 83854            |  |
| 5. Organized Under the Laws of:  |                  | 6. Annual Report must be signed.*  |            |  |         |                  |  |
| <b>ID<br/>W 50859</b>  |                  | Signature: AKWalton  |            |  |         | Date: 03/18/2013 |  |
|  |                  | Name (type or print): AKWalton   |            |  |         | Title: Member    |  |
| Processed 03/18/2013   |                  | * Electronically provided signatures are accepted as original signatures.  |            |  |         |                  |  |