

|                                                                                                                                                        |                |                                                                                        |        |                                                    |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------|--------|----------------------------------------------------|------------------|-------------|--|
| No. <b>W 35760</b>                                                                                                                                     |                | <b>Due no later than Jan 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>                                                              |        | BRUCE MITCHELL<br>2104 S 100 E<br>OAKLEY ID 83346  |                  |             |  |
|                                                                                                                                                        |                | <b>1. Mailing Address: Correct in this box if needed.</b>                              |        | 3. <u>New</u> Registered Agent Signature:*         |                  |             |  |
|                                                                                                                                                        |                | GOLDEN STATE EQUIPMENT, LLC<br>BRUCE MITCHELL<br>P.O. BOX 49<br>OAKLEY ID 83346<br>USA |        |                                                    |                  |             |  |
| 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                                                                                                                                                 | BRUCE MITCHELL | 2104 S 100 E                                                                           | OAKLEY | ID                                                 | USA              | 83346       |  |
| MEMBER                                                                                                                                                 | CARL BORGSTROM | PO BOX 183                                                                             | GRANBY | CO                                                 | USA              | 90446       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                      |        |                                                    |                  |             |  |
| <b>ID<br/>W 35760</b>                                                                                                                                  |                | Signature: Bruce Mitchell                                                              |        |                                                    | Date: 11/10/2009 |             |  |
|                                                                                                                                                        |                | Name (type or print): Bruce Mitchell                                                   |        |                                                    | Title: Member    |             |  |
| Processed 11/10/2009                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.              |        |                                                    |                  |             |  |