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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------|---------|-----------------------------------|--|
| No. <b>W 28945</b>                                                                                                                                     |                | Due no later than Mar 31, 2011                                                                                                                                                    |          | 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>PINES PROPERTIES LLC<br>THOMAS R SMITH<br>3714 S SOMMER RD<br>VERADALE WA 99037 |          | CORSER LLC<br>SCOTT BUILDING<br>413 CEDAR ST<br>WALLACE ID 83873 |         |                                   |  |
|                                                                                                                                                        |                |                                                                                                                                                                                   |          | 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                                                                                                                                                 | THOMAS S SMITH | 3714 S SOMMER RD                                                                                                                                                                  | VERADALE | WA                                                               | USA     | 99037                             |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 28945</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Thomas R Smith<br>Name (type or print): Thomas R Smith                                                                            |          |                                                                  |         | Date: 01/17/2011<br>Title: Member |  |
| Processed 01/17/2011                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                         |          |                                                                  |         |                                   |  |