

No. <b>W 21341</b>	<b>Due no later than November 30, 2008 Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  THOR TREATMENT TECHNOLOGIES, LLC 720 PARK BLVD BOISE, ID 83712		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE, ID 83702												
			3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td colspan="6" style="text-align: center;">**PLEASE SEE ATTACHED LIST**</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	**PLEASE SEE ATTACHED LIST**					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
**PLEASE SEE ATTACHED LIST**															
5. Organized Under the Laws of:  DELAWARE W 21341	6. Signature <u><i>Dianne Rice</i></u> Date <u>11-21-2008</u> Name <small>(Typed or Printed)</small> <u>Dianne Rice</u> Title <u>Manager Rep.</u>														

Issued 09/02/2008

**Do Not Tape or Staple**

200811004324

## Managers Report

As of 11-21-2008

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### THOR Treatment Technologies, LLC

#### Managers

**Laurie J. Hollick-Polochko**

**Manager**

Effective: 03-02-2005

Primary Address:

**Lewis Johnson**

**Manager**

Effective: 08-11-2008

Primary Address:

**Thomas W. Oliver**

**Manager**

Effective: 06-25-2002

Primary Address: Studsvik, Inc.  
151 T.C. Runion Road  
Erwin, TN 37650

**David Allan Pethick**

**Manager**

Effective: 08-11-2008

Primary Address: 106 Newberry Street, S.W.  
Aiken, SC 29801