No. W 5641		Due no later than Feb 28, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LORI KRUSE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		40 CONANT VALLEY LOOP SWAN VALLEY ID 83449 3. New Registered Agent Signature:*			
		SOUTH FORK OUTF LORI B KRUSE PO BOX 20					
		SWAN VALLEY ID 83449					
NO FILING FEE IF RECEIVED BY DUE DATE							
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 MARK F RO		CKEFELLER	ROOM 5600 30 ROCKEFELLER PLAZE	NEW YORK	NY	USA	10112
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
		Signature: Lori Kruse		Date: 12/16/2009			
ID W 5641							
		Name (type or print): Lori Kruse		Title: Controller			
* Electronically provided signatures are accepted as original signatures.							