

|                                                                                                                                                        |           |                                                                                                                                                                         |       |                                                    |         |              |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|--------------|--|
| No. <b>W 66801</b>                                                                                                                                     |           | <b>Due no later than Sep 30, 2009</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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>MOORE GAMES LLC<br>TED MOORE<br>11070 W KIPLING WAY<br>NAMPA ID 83651 |       | TED MOORE<br>11070 W KIPLING WAY<br>NAMPA ID 83651 |         |              |  |
|                                                                                                                                                        |           |                                                                                                                                                                         |       | 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                                                                                                                                                 | TED MOORE | 11070 W KIPLING WAY                                                                                                                                                     | NAMPA | ID                                                 | USA     | 83651        |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 66801</b>                                                                                           |           | 6. Annual Report must be signed.*<br>Signature: Ted Moore<br>Name (type or print): Ted Moore                                                                            |       |                                                    |         |              |  |
|                                                                                                                                                        |           |                                                                                                                                                                         |       | Date: 09/29/2009                                   |         | Title: Owner |  |
| Processed 09/29/2009                                                                                                                                   |           | * Electronically provided signatures are accepted as original signatures.                                                                                               |       |                                                    |         |              |  |