

|  |              |   |       |  |         |             |  |
|--|--------------|---|-------|--|---------|-------------|--|
| No. <b>W 8467</b>  |              | <b>Due no later than Apr 30, 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>   |       | BILL ASAY<br>5750 W 2000 N<br>MALAD ID 83252       |         |             |  |
|  |              | <b>1. Mailing Address: Correct in this box if needed.</b>                 |       | 3. <u>New</u> Registered Agent Signature:*         |         |             |  |
|  |              | B. & N. ASAY DAIRY, LLC<br>BILL ASAY<br>5750 W 2000 N<br>MALAD ID 83252   |       |  |         |             |  |
| 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   | NANCY L ASAY | 5750 W. 2000 N.   | MALAD | ID   | USA     | 83252       |  |
| MEMBER   | BILL ASAY    | 5750 W 2000 N   | MALAD | ID   | USA     | 83252       |  |
| 5. Organized Under the Laws of:  |              | 6. Annual Report must be signed.*   |       |  |         |             |  |
| <b>ID<br/>W 8467</b>   |              | Signature: Bill Asay  |       | Date: 02/13/2010                                   |         |             |  |
|  |              | Name (type or print): Bill Asay   |       | Title: Mamber/Manager                              |         |             |  |
| Processed 02/13/2010   |              | * Electronically provided signatures are accepted as original signatures. |       |  |         |             |  |