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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>W 66380</b>                                                                                                                                     |                 | <b>Due no later than Sep 30, 2012</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>                                                                                                                                        |          | GARY W CAMPBELL<br>3401 S MURLO WAY<br>MERIDIAN ID 83642-4846 |         |             |  |
|                                                                                                                                                        |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br>TREASURE VALLEY CLOSETS LLC<br>GARY W CAMPBELL<br>3401 S MURLO WAY<br>MERIDIAN ID 83642-4846<br>USA |          | 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 |  |
| MANAGER                                                                                                                                                | GARY W CAMPBELL | 3401 S. MURLO WAY                                                                                                                                                | MERIDIAN | ID                                                            | USA     | 83642-4846  |  |
| MANAGER                                                                                                                                                | LORI K CAMPBELL | 3401 S MURLO WAY                                                                                                                                                 | MERIDIAN | ID                                                            | USA     | 83642-4846  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 66380</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Lori Campbell<br>Name (type or print): Lori Campbell                                                             |          |                                                               |         |             |  |
|                                                                                                                                                        |                 | Date: 07/20/2012<br>Title: Manager                                                                                                                               |          |                                                               |         |             |  |
| Processed 07/20/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                        |          |                                                               |         |             |  |