

|                                                                                                                                                        |              |                                                                                                                                                                                  |         |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 57554</b>                                                                                                                                     |              | <b>Due no later than Dec 31, 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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>EKC MANAGEMENT LLC<br>KAREN CUTLIP<br>478 SUTTLER CREEK RD<br>KOOSKIA ID 83539 |         | KAREN CUTLIP<br>478 SUTTLER CREEK RD<br>KOOSKIA ID 83539 |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                                                                  |         | 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                                                                                                                                                | KAREN CUTLIP | 478 SUTTLER CREEK RD                                                                                                                                                             | KOOSKIA | ID                                                       | USA     | 83539       |  |
| MANAGER                                                                                                                                                | ELDON CUTLIP | 478 SUTTLER CREEK RD                                                                                                                                                             | KOOSKIA | ID                                                       | USA     | 83539       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 57554</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: Karen Cutlip<br>Name (type or print): Karen Cutlip                                                                               |         |                                                          |         |             |  |
|                                                                                                                                                        |              | Date: 11/08/2012<br>Title: Owner                                                                                                                                                 |         |                                                          |         |             |  |
| Processed 11/08/2012                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                                        |         |                                                          |         |             |  |