

No. W 53225	Due no later than Aug 31, 2007 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. EXCHANGE 06-3479, LLC., AN IDAHO LIMITED LIABILITY COMPANY PO BOX 51298 IDAHO FALLS ID 83405		THEL W CASPER 901 PIER VIEW DR STE 201 IDAHO FALLS ID 83402			
			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	THE ALLEN BALL AND CONNIE BALL FAMILY TRUST	PO BOX 51298	IDAHO FALLS	ID	USA	83405
5. Organized Under the Laws of: ID W 53225		6. Annual Report must be signed.* Signature: Allen Ball, Trustee Name (type or print): Allen Ball, Trustee Date: 09/04/2007 Title: Member				
Processed 09/04/2007		* Electronically provided signatures are accepted as original signatures.				