

|                                                                                                                                                        |                   |                                                                                    |       |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 70094</b>                                                                                                                                     |                   | <b>Due no later than Jan 31, 2011</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 CUNNINGHAM<br>5900 PEARL RD<br>EAGLE ID 83616 |         |                  |  |
|                                                                                                                                                        |                   | <b>1. Mailing Address: Correct in this box if needed.</b>                          |       | 3. <u>New</u> Registered Agent Signature:*         |         |                  |  |
|                                                                                                                                                        |                   | 3 HORSE RANCH VINEYARDS, LLC<br>GARY CUNNINGHAM<br>5900 PEARL RD<br>EAGLE ID 83616 |       |                                                    |         |                  |  |
| 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                                                                                                                                                 | GARY CUNNINGHAM   | 5900 PEARL RD                                                                      | EAGLE | ID                                                 | USA     | 83616            |  |
| MEMBER                                                                                                                                                 | MARTHA CUNNINGHAM | 5900 PEARL RD                                                                      | EAGLE | ID                                                 | USA     | 83616            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                  |       |                                                    |         |                  |  |
| <b>ID<br/>W 70094</b>                                                                                                                                  |                   | Signature: Martha Cunningham                                                       |       |                                                    |         | Date: 01/03/2011 |  |
|                                                                                                                                                        |                   | Name (type or print): Martha Cunningham                                            |       |                                                    |         | Title: Owner     |  |
| Processed 01/03/2011                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.          |       |                                                    |         |                  |  |