

|                                                                                                                                                        |                   |                                                                                                                                                                                |               |                                                                 |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------|---------|-------------|--|
| No. <b>C 148391</b>                                                                                                                                    |                   | <b>Due no later than Mar 31, 2016</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>DLF ENTERPRISES LTD.<br>LINDA L LAMPHERE<br>PO BOX 437<br>MOYIE SPRINGS ID 83845 |               | DENNIS E LAMPHERE<br>340 MAAS LOOP RD<br>BONNERS FERRY ID 83805 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                                                |               | 3. <u>New</u> Registered Agent Signature:*                      |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                   |                                                                                                                                                                                |               |                                                                 |         |             |  |
| Office Held                                                                                                                                            | Name              | Street or PO Address                                                                                                                                                           | City          | State                                                           | Country | Postal Code |  |
| DIRECTOR                                                                                                                                               | DENNIS E LAMPHERE | P. O. BOX 437                                                                                                                                                                  | MOYIE SPRINGS | ID                                                              | USA     | 83845       |  |
| SECRETARY                                                                                                                                              | LINDA L LAMPHERE  | P. O. BOX 437                                                                                                                                                                  | MOYIE SPRINGS | ID                                                              | USA     | 83845       |  |
| PRESIDENT                                                                                                                                              | DENNIS E LAMPHERE | P. O. BOX 437                                                                                                                                                                  | MOYIE SPRINGS | ID                                                              | USA     | 83845       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 148391</b>                                                                                          |                   | 6. Annual Report must be signed.*<br>Signature: Linda Lamphere<br>Name (type or print): Linda Lamphere                                                                         |               |                                                                 |         |             |  |
|                                                                                                                                                        |                   | Date: 01/22/2016<br>Title: secretary                                                                                                                                           |               |                                                                 |         |             |  |
| Processed 01/22/2016                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                      |               |                                                                 |         |             |  |