

|  |   |  |  |                                    |         |             |
|--|---|--|--|------------------------------------|---------|-------------|
| No. <b>W 40525</b>   | <b>Due no later than Jun 30, 2010</b><br><b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b><br>TAYLOR-CHRISTENSEN, LLC<br>ROBIN R CHRISTENSEN<br>PO BOX 3395<br>HAILEY ID 83333 |  | LAWSON & LASKI PLLC<br>675 SUN VALLEY RD STE A<br>KETCHUM ID 83340 |                                    |         |             |
|  |   |  | 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   | ROBIN CHRISTENSEN   | PO BOX 3395  | HAILEY   | ID                                 | USA     | 83333       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 40525</b>   |   | 6. Annual Report must be signed.*<br>Signature: Robin Christensen<br>Name (type or print): Robin Christensen |  | Date: 07/27/2010<br>Title: Manager |         |             |
| Processed 07/27/2010   |   | * Electronically provided signatures are accepted as original signatures.                                    |  |                                    |         |             |