| No. <b>L 6056</b>  |      | the second second and the second seco |                      | 2. Registered Agent and Address (NO PO BOX) |       |            |             |
|--|------|--|----------------------|---|-------|------------|-------------|
| Return to:   |      | Annual Report Form   |                      | STEPHEN E MARTIN                            |       |            |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |      | 1. Mailing Address: Correct in this box if needed.   |                      | 425 S HOLMES AVE<br>IDAHO FALLS ID 83401    |       |            |             |
|  |      | MCGRANE BROTHERS ENTERPRISES LP<br>STEPHEN E MARTIN<br>PO BOX 3189<br>IDAHO FALLS ID 83403-3189<br>USA   |                      | IDATIO PALLS ID 65401                       |       |            |             |
|  |      |  |                      | 3. <u>New</u> Registered Agent Signature:*  |       |            |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |      |  |                      |   |       |            |             |
| Office Held  | Name |  | Street or PO Address | City  | State | Country    | Postal Code |
| GENERAL PARTNER MCGRANE FAMILY LLC   |      | C/O MICHAEL J MCGRANE, MANAGER<br>1014 N GREY PEBBLE WAY   | EAGLE                | ID  | USA   | 83616-4180 |             |
| 5. Organized Under the Laws of:  |      | 6. Annual Report must be signed.*  |                      |   |       |            |             |
| ID   |      | Signature: Stephen E. Martin   |                      | Date: 01/22/2010                            |       |            |             |
| L 6056   |      | Name (type or print): Stephen E. Martin  |                      | Title: Attorney                             |       |            |             |
| Processed 01/22/2010   |      | * Electronically provided signatures are accepted as original signatures.  |                      |   |       |            |             |