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|--|----------------------------|--|------------|---|---------|-------------|--|
| No. W 85357 | | Due no later than Jul 31, 2012 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TOPADA, LLC 1020 MAIN ST BUHL ID 83316 | | L TODD AMES 161 5TH AVE S STE 200 TWIN FALLS ID 83301 | | | |
| | | | | 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 | PAMELA MCCLAIN | 100 4TH AVE S | BUHL | ID | USA | 83316-1247 | |
| MEMBER | HOMEFRONT DEVELOPMENT CORP | 778 CARRIAGE LN N | TWIN FALLS | ID | USA | 83301-1247 | |
| MEMBER | DANIEL S DEAGLE | 875 RIMVIEW LN W | TWIN FALLS | ID | USA | 83301-3611 | |
| 5. Organized Under the Laws of: ID W 85357 | | 6. Annual Report must be signed.* Signature: Pamela McClain Name (type or print): Pamela McClain Date: 05/23/2012 Title: Member | | | | | |
| Processed 05/23/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |