

No. W 50650		Due no later than May 31, 2010		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. OLIPHANT FINANCIAL, LLC ROBERT A MORRIS 9009 TOWN CENTER PARKWAY LAKEWOOD RANCH FL 34202		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE ID 83702	
				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
MANAGER	ROBERT A MORRIS	9009 TOWN CENTER PARKWAY	LAKEWOOD RANCH	FL	USA 34202
5. Organized Under the Laws of: FL W 50650		6. Annual Report must be signed.* Signature: Robert A MORRIS Name (type or print): Robert A MORRIS Date: 03/15/2010 Title: President			
Processed 03/15/2010		* Electronically provided signatures are accepted as original signatures.			