

No. C 41347		Due no later than Aug 31, 2010 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. SUN VALLEY STAGES, INC. KAREN A KIRKEIDE P. O. BOX 936 TWIN FALLS ID 83303-0936		KAREN KIRKEIDE 119 SOUTH PARK AVENUE WEST TWIN FALLS ID 83301			
						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	
PRESIDENT	KAREN A KIRKEIDE	119 SOUTH PARK AVENUE WEST	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID C 41347		6. Annual Report must be signed.* Signature: Karen A Kirkeide Name (type or print): Karen A Kirkeide Date: 08/30/2010 Title: President					
Processed 08/30/2010 * Electronically provided signatures are accepted as original signatures.							