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|--|------------------------|--|---------|--|---------|-------------|--|
| No. W 34726 | | Due no later than Nov 30, 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 | | JAMES F TOPLIFF 1424 E SHERMAN AVE-EASTLAKE PROF STES #300 COEUR D'ALENE ID 83814 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 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 | JOHN K RICHARDSON JR | 417 W 19TH | SPOKANE | WA | USA | 99203 | |
| MANAGER | JACQUELINE M. PETERSON | 2110 N. WASHINGTON | SPOKANE | WA | USA | 99205 | |
| MANAGER | KATHRYN C. EDMONDS | 2110 N. WASHINGTON | SPOKANE | WA | USA | 99205 | |
| 5. Organized Under the Laws of: ID W 34726 | | 6. Annual Report must be signed.* Signature: John Richardson Name (type or print): John Richardson | | Date: 09/29/2010 Title: Manager | | | |
| Processed 09/29/2010 | | * Electronically provided signatures are accepted as original signatures. | | | | | |