| No. W 9521  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE |                    | Due no later than Aug 31, 2006 Annual Report Form  1. Mailing Address: Correct in this box if needed.  WESTERN WINGS BIRDS & CLAYS, L.L.C. DAVID W ROBISON 2551 E 1000 N ROBERTS ID 83444 |   | 2. Registered A           | 2. Registered Agent and Address (NO PO BOX)  DAVID W ROBISON 2551 E 1000 N ROBERTS ID 83444  3. New Registered Agent Signature:* |         |             |  |
|--|--------------------|---|---|---------------------------|--|---------|-------------|--|
|  |                    |   |   | 2551 E 1000<br>ROBERTS IE |  |         |             |  |
| 1. Limited Liability Co  | mpanies: Enter Nai | mes and Addresse  | s of at least one Member or Manager.      | I                         |  |         |             |  |
| Office Held  | Name               |   | Street or PO Address                      | City                      | State  | Country | Postal Code |  |
| MEMBER   | DAVID W R          | OBISON  | 2551 E 1000 N                             | ROBERTS                   | ID   |         | 83444       |  |
| MEMBER   | TERRI A RO         | DBISON  | 2551 E 1000 N                             | ROBERTS                   | ID   |         | 83444       |  |
| MEMBER   | BROOKS D           | ROBISON   | 951 N 2600 E                              | ROBERTS                   | ID   | USA     | 83444       |  |
| MEMBER   | JORDAN D I         | ROBISON   | 2792 E 800 N                              | ROBERTS                   | ID   | USA     | 83444       |  |
| MEMBER   | RILEY L ROBISON    |   | 953 N 2600 E                              | ROBERTS                   | ID   | USA     | 83444       |  |
| MEMBER   | STEPHANIE          | R MOSER   | 1084 N PAULOS BLVD                        | TOOELE                    | UΤ   | USA     | 84074       |  |
| 5. Organized Under the Laws of:  |                    | 6. Annual Report must be signed.*   |   |                           |  |         |             |  |
| IDAHO<br>W 9521  |                    | Signature: LINDSAY ROBISON  |   | Dat                       | Date: 06/09/2006   |         |             |  |
|  |                    | Name (type or print): LINDSAY ROBISON Title: OFFICE MANAGER   |   |                           |  |         |             |  |
| Processed 06/09/200  | 6                  | * Electronically pr   | ovided signatures are accepted as origina | Il signatures.            |  | _       |             |  |