

|  |                    |   |            |  |         |             |  |
|--|--------------------|---|------------|--|---------|-------------|--|
| No. <b>W 23985</b>   |                    | <b>Due no later than May 31, 2010</b><br><b>Annual Report Form</b>  |            | 2. Registered Agent and Address ( <b>NO PO BOX</b> )                 |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                    | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>M S PETERSEN ENTERPRISES, L.L.C.<br>MARTIN D. PETERSEN<br>5382 E SHORELINE DR<br>POST FALLS ID 83854-6859<br>USA |            | MARTIN D PETERSEN<br>5382 E SHORELINE DR<br>POST FALLS ID 83854-6859 |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                    |   |            | 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  | MARTIN D PETERSEN  | 5382 E. SHORELINE DR.   | POST FALLS | ID   | USA     | 83854-6859  |  |
| MANAGER  | SHIRLEY D PETERSEN | 5382 E. SHORELINE DR.   | POST FALLS | ID   | USA     | 83854-6859  |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 23985</b>                                 |                    | 6. Annual Report must be signed.*<br><br>Signature: Martin D. Petersen<br>Name (type or print): Martin D. Petersen  |            |  |         |             |  |
|  |                    | Date: 03/12/2010<br>Title: Manager  |            |  |         |             |  |
| Processed 03/12/2010   |                    | * Electronically provided signatures are accepted as original signatures.   |            |  |         |             |  |