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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------|---------------------|
| No. <b>W 1805</b>                                                                                                                                      |                    | <b>Due no later than Dec 31, 2010</b>                                                                                                                                                                    |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>                              |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>GULLBORN MANAGEMENT, L.C.<br>TY ERICKSON ROSEMARK<br>2184 CHANNING WAY PMB 135<br>IDAHO FALLS ID 83404 |             | IDAHO SERVICE COMPANY<br>101 S CAPITOL BLVD 10TH FLOOR<br>BOISE ID 83702<br>USA |                     |
|                                                                                                                                                        |                    |                                                                                                                                                                                                          |             | 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                                                                                                                                                | TY BOLTON ERICKSON | 2327 CORONADO ST.                                                                                                                                                                                        | IDAHO FALLS | ID                                                                              | USA 83404           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 1805</b>                                                                                            |                    | 6. Annual Report must be signed.*<br>Signature: Ty Erickson<br>Name (type or print): Ty Erickson<br>Date: 01/13/2011<br>Title: Manager                                                                   |             |                                                                                 |                     |
| Processed 01/13/2011                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                                                                |             |                                                                                 |                     |