

| | | | | | | | |
|--|------------------|---|---------|--|---------|-------------|--|
| No. W 10361 | | Due no later than Dec 31, 2011 | | 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 1. Mailing Address: Correct in this box if needed. WILLIAMS-RICKS FAMILY LLC H LYNN WILLIAMS 3344 NORTH 375 EAST REXBURG ID 83440 | | H LYNN WILLIAMS 3344 NORTH 375 EAST REXBURG ID 83440 | | | |
| | | | | 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 | H LYNN WILLIAMS | 3344 NORTH 375 EAST | REXBURG | ID | USA | 83440 | |
| MANAGER | NEDRA R WILLIAMS | 3344 NORTH 375 EAST | REXBURG | ID | USA | 83440 | |
| 5. Organized Under the Laws of: ID W 10361 | | 6. Annual Report must be signed.* Signature: H. Lynn Williams Name (type or print): H. Lynn Williams | | | | | |
| | | Date: 01/19/2012 Title: Manager | | | | | |
| Processed 01/19/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |