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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------|---------|-------------|
| No. <b>C 166588</b>                                                                                                                                    |                    | <b>Due no later than Apr 30, 2010</b>                                                                                                                                     |        | <b>2. Registered Agent and Address (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>TERRAMARK, INC.<br>MICHAEL HOFFMANN<br>325 N MAIN ST<br>MOSCOW ID 83843 |        | MICHAEL A HOFFMANN<br>325 N MAIN ST<br>MOSCOW ID 83843 |         |             |
|                                                                                                                                                        |                    |                                                                                                                                                                           |        | 3. <u>New</u> Registered Agent Signature:*             |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                    |                                                                                                                                                                           |        |                                                        |         |             |
| Office Held                                                                                                                                            | Name               | Street or PO Address                                                                                                                                                      | City   | State                                                  | Country | Postal Code |
| PRESIDENT                                                                                                                                              | MICHAEL A HOFFMANN | 2435 ARBORCREST                                                                                                                                                           | MOSCOW | ID                                                     | USA     | 83843       |
| SECRETARY                                                                                                                                              | LINDA HOFFMANN     | 2435 ARBORCREST                                                                                                                                                           | MOSCOW | ID                                                     | USA     | 83843       |
| 5. Organized Under the Laws of:<br><br><b>OR<br/>C 166588</b>                                                                                          |                    | 6. Annual Report must be signed.*<br>Signature: Michael Hoffmann<br>Name (type or print): Michael Hoffmann<br>Date: 02/17/2010<br>Title: President                        |        |                                                        |         |             |
| Processed 02/17/2010                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                                 |        |                                                        |         |             |