

No. W 70699		Due no later than Jan 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. NEW LAKE PLAZA LLC JONATHAN ZURKOFF 311 VILLAGE DR PMB 3047 TAMARACK ID 83615 USA		JONATHAN ZURKOFF 960 BROADWAY AVE STE 100 BOISE ID 83706			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name TAMARACK RESORT LLC	Street or PO Address 311 VILLAGE DR PMB 3047		City TAMARACK	State ID	Country USA	Postal Code 83615
5. Organized Under the Laws of: DE W 70699		6. Annual Report must be signed.* Signature: Michael Drury Name (type or print): Michael Drury Date: 02/09/2009 Title: Controller					
Processed 02/09/2009 * Electronically provided signatures are accepted as original signatures.							