No. **W 26626**	**Due no later than Oct 31, 2012** **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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** ROBINSON DEVELOPMENT, LLC MICHAEL W ROBINSON P O BOX 46 KOOTENAI ID 83840	MICHAEL W ROBINSON 3107 DUFORT ROAD SAGLE ID 83860 3. New 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	MICHAEL W ROBINSON	P O BOX 46	KOOTENAI	ID	USA	83840

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 26626**	Signature: Michael W. Robinson Name (type or print): Michael W. Robinson	Date: 08/13/2012 Title: Manager

Processed 08/13/2012

* Electronically provided signatures are accepted as original signatures.