

No. W 3271		Due no later than 12/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. MARVIN GARDENS, L.L.C. MARVIN R ERICKSON 4095 E ERICKSON DR COEUR D'ALENE ID 83815		JOHN B. GEDDES 147 W ORCHARD HAYDEN ID 83835	
				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	Zip
Manager	Marvin R. Erickson	4095 E. Erickson Dr.	Coeur d'Alene	Idaho	83815
Manager	Sharon N. Erickson	4095 E. Erickson Dr.	Coeur d'Alene	Idaho	83815
5. Organized Under the Laws of: ID W 3271					
6. Annual Report must be signed.					
Signature: <u>Sharon N Erickson</u>		Date: <u>Nov. 01, 2009</u>			
Name(type or print): <u>Sharon N. Erickson</u>		Title: <u>Manager</u>			

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM