




No. <b>W 63465</b>	Due no later than Jun 30, 2013 <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> BURLEIGH TOMCHAK 202 BASSETT RD ROBERTS ID 83444																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> WINEGLASS RIVER PROPERTIES LLC 202 BASSETT RD ROBERTS ID 83444		3. <u>New</u> Registered Agent Signature.																																			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>BURLEIGH TOMCHAK</td> <td>202 BASSETT RD, Roberts, Id.</td> <td>Id.</td> <td>US</td> <td></td> <td>83444</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>JUSTIN TOMCHAK</td> <td>2197 BEGREEN LANE, Id.</td> <td>Id.</td> <td>US</td> <td></td> <td>83401</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>BRIAN TOMCHAK</td> <td>218 BASSETT RD, Roberts, Id.</td> <td>Id.</td> <td>US</td> <td></td> <td>83444</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>MABEL TOMCHAK</td> <td>202 BASSETT RD, Roberts, Id.</td> <td>Id.</td> <td>US</td> <td></td> <td>83444</td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	BURLEIGH TOMCHAK	202 BASSETT RD, Roberts, Id.	Id.	US		83444	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	JUSTIN TOMCHAK	2197 BEGREEN LANE, Id.	Id.	US		83401	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	BRIAN TOMCHAK	218 BASSETT RD, Roberts, Id.	Id.	US		83444	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MABEL TOMCHAK	202 BASSETT RD, Roberts, Id.	Id.	US		83444
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5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">IDAHO W 63465</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:   </td> <td style="width: 40%;">           Date:  <u>5-28-13</u> </td> </tr> <tr> <td>           Name (type or print):  <u>MABEL TOMCHAK</u> </td> <td>           Title:  <u>member</u> </td> </tr> </table>			Signature: 	Date: <u>5-28-13</u>	Name (type or print): <u>MABEL TOMCHAK</u>	Title: <u>member</u>																															
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Issued 04/30/2013 by KAH																																						

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