No. W 60572		Due no later than Mar 31, 2012	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. LEGACY LAKES LLC BRUCE SIMON PO BOX 1170 WILSON WY 83014	MARSHALL MCINNIS 375 E EAST WOODLAND WAY CREEKSIDE MEADOWS DRIGGS ID 83422 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Fater Ner		nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	BRUCE SIMO		WILSON	WY	USA	83014
5. Organized Under the Laws of: WY W 60572		6. Annual Report must be signed.* Signature: Bruce Simon Name (type or print): Bruce Simon	Date: 01/12/2012 Title: Manager			
Processed 01/12/2012 * Electronically provided signatures are accepted as original signatures.						