No. **W 54016**	**Due no later than Aug 31, 2011**	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**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** HARBOR VIEW, LLC CHRISTY VAUGHN 817 W IOWA ST BOISE ID 83706 USA	CHAD VAUGHN 817 IOWA ST BOISE ID 83706 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	CHAD VAUGHN	817 IOWA ST	BOISE	ID	USA	83706
MANAGER	CHRISTY VAUGHN	817 IOWA ST	BOISE	ID	USA	83706

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 54016**	Signature: Christy Vaughn	Date: 07/19/2011
	Name (type or print): Christy Vaughn	Title: Manager

Processed 07/19/2011

* Electronically provided signatures are accepted as original signatures.