




No. W 59433	Due no later than Feb 28, 2015 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) LINDA REED 24174 N WENDLER RATHDRUM ID 83858
Return to: SECRETARY OF STATE 450 N 4th 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. LOYOLA BEACH, LLC 24174 N WENDLER RATHDRUM ID 83858		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Richard Reed	24174 N Wendler	Rathdrum	Id	Kootenai	83858
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Chad Reed	143 Lois Lane	Holly Springs	NC	Harnett	27540
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Linda Reed	24174 W. Wendler	Rathdrum	Id	Kootenai	83858
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 59433 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>Jan 12, 2015</u> </td> </tr> <tr> <td> Name (type or print): <u>Richard A. Reed</u> </td> <td> Title: <u>Manager</u> </td> </tr> </table>	Signature: 	Date: <u>Jan 12, 2015</u>	Name (type or print): <u>Richard A. Reed</u>	Title: <u>Manager</u>
Signature: 	Date: <u>Jan 12, 2015</u>				
Name (type or print): <u>Richard A. Reed</u>	Title: <u>Manager</u>				

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