No. <b>W 98269</b>		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	CORPORATION SERVICE COMPANY			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	12550 W EXPLORER DR STE 100 BOISE ID 83713			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LAKESHORE FARMS 2 LLC CHAD M DRAKE 99 HIGH ST 26TH FLOOR	USA  3. New Registered Agent Signature:*			
	BOSTON MA 02110				
NO FILING FEE IF RECEIVED BY DUE DATE	USA				
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 CAROLYN M	BAILEY 99 HIGH ST 26TH FLOOR	BOSTON	MA	USA	02110
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
DE	Signature: Carolyn M. Bailey Date: 09/26/2011				
W 98269	Name (type or print): Carolyn M. Bailey	Title: Secretary & Treasurer			
Processed 09/26/2011	* Electronically provided signatures are accepted as original signatures.				