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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 15607</b>                                                                                                                                     |                   | <b>Due no later than Jun 30, 2007</b>                                                                                                           |               | 2. Registered Agent and Address <b>(NO PO BOX)</b>                   |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>1. Mailing Address: Correct in this box if needed.</b><br>WESTPAC DEVELOPMENT CO., LLC<br>JOHN C MORRISROE<br>PO BOX 3604<br>HAYDEN ID 83835 |               | MICHAEL R CHAPMAN<br>2020 LAKEWOOD STE 221<br>COEUR D ALENE ID 83814 |         |                  |  |
|                                                                                                                                                        |                   |                                                                                                                                                 |               | 3. <u>New</u> 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                                                                                                                                                | PETER L MORRISROE | 81815 MOUNTAIN VIEW LANE                                                                                                                        | LA QUINTA     | CA                                                                   | USA     | 92253            |  |
| MANAGER                                                                                                                                                | JOHN C MORRISROE  | 3953 22ND STREET                                                                                                                                | COEUR D'ALENE | ID                                                                   | USA     | 83815            |  |
| MANAGER                                                                                                                                                | JOHN S SITTER     | 10417 N. LAKEVIEW DR #6-A                                                                                                                       | HAYDEN        | ID                                                                   | USA     | 83835            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                                                                               |               |                                                                      |         |                  |  |
| <b>ID<br/>W 15607</b>                                                                                                                                  |                   | Signature: Casey Morrisroe                                                                                                                      |               |                                                                      |         | Date: 07/09/2007 |  |
|                                                                                                                                                        |                   | Name (type or print): Casey Morrisroe                                                                                                           |               |                                                                      |         | Title: Manager   |  |
| Processed 07/09/2007                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                       |               |                                                                      |         |                  |  |