

No. <b>W 19388</b>		<b>Due no later than May 31, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  LAKE CITY POOL & SPA, LLC ROB SCHULHOFF PO BOX 177 HAYDEN ID 83835		ROB SCHULHOFF 10645 OAK ST HAYDEN 83835	
				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
MEMBER	ROB SCHULHOFF	PO BOX 2017	COEUR D'ALENE	ID	83816
5. Organized Under the Laws of:  <b>ID W 19388</b>		6. Annual Report must be signed.* Signature: Rob Schulhoff Name (type or print): Rob Schulhoff Date: 04/16/2015 Title: Owner			
Processed 04/16/2015		* Electronically provided signatures are accepted as original signatures.			