No. W 79638		Due no later than Dec 31, 2010		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JAMES A ROBSON DMD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ROBSON PROPERTIES, LLC JAMES A ROBSON DMD 1609 NORTHWOOD DR			1609 NORTHWOOD DR HAYDEN LAKE ID 83835-8582			
		HAYDEN LAKE	3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*				
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	
MEMBER SHELLY D R		OBSON	1609 NORTHWOOD DR	HAYDEN LAKE	ID	USA	83835-8582	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 79638		Signature: Jan		Date: 01/27/2011				
		Name (type or		Title: Owner				
Processed 01/27/2011 * Electronically provided signatures are accepted as original signatures.								