No. W 15990		Due no later than Jul 31, 2012		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		KENNETH J POSTMA 27 RIDGE RD CASCADE ID 83611				
		1. Mailing Address: Correct in this box if needed. CABIN CREEK ENTERPRISES, LLC STEPHANIE L JOHNSON PO BOX 1000 CASCADE ID 83611 USA						
					3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held N	lame		Street or PO Address		City	State	Country	Postal Code
Total Control	ENNETH J TEPHANIE	POSTMA L JOHNSON	PO BOX 522 PO BOX 776		CASCADE DONNELLEY	ID ID	USA USA	83611 83615
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 15990		Signature: Stephanie L. Johnson Date: 05/17/2012						
		Name (type or print): Stephanie L. Johnson			Title: Member			
Processed 05/17/2012 * Electronically provided signatures are accepted as original signatures.								