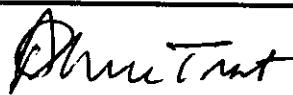


No. W 92265		Due no later than Apr 30, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RIVERS EDGE RESORT L.L.C. SHAWN MULHOLLAND PO BOX 802 LAVA HOT SPRINGS ID 83246		SHAWN MULHOLLAND 11244 S DEMPSEY LAVA HOT SPRINGS ID 83246	
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager or Member		Name	Street or PO Address	City	State Country
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> member D		SHAWN MULHOLLAND	POBox 370	LAVA HOT SPRINGS	10 ID USA 83246
		LESLIE MULHOLLAND	POBox 370	LAVA HOT SPRINGS	10 ID USA 83246
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> member D		RICHARD A. WHITE	933 E. JUANITA	GILBERT AZ	85234
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> member D		JAN WHITE	933 E. JUANITA	GILBERT AZ	85234
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> member D		DARREL TROST	17 ROLLINGWOOD LANE, SANDY, UT		84092
5. Organized Under the Laws of:		6.			
IDAHO W 92265		Signature: 		Date: 4/25/13	
		Name (type or print): DARREL TROST		Title: 	
Issued 04/09/2013 by SLD					
126914					