

No. <b>W 445</b>	<b>Due no later than Jul 31, 2009</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b> LAKESIDE LODGE OPERATING COMPANY, L.C. CARL L HANSEN P. O. BOX 27687 SALT LAKE CITY UT 84127-0687		RALPH FRANCIS 1405 PRESTO DR IDAHO FALLS ID 83402			
			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	CARL L HANSEN	P. O. BOX 27687	SALT LAKE CITY	UT	USA	84127-0687
5. Organized Under the Laws of:  <b>UT W 445</b>		6. Annual Report must be signed.* Signature: C. Kim Anderson Name (type or print): C. Kim Anderson Date: 06/10/2009 Title: Controller				
Processed 06/10/2009		* Electronically provided signatures are accepted as original signatures.				