

No. <b>W 42964</b>		<b>Due no later than Sep 30, 2015</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>1. Mailing Address: Correct in this box if needed.</b>  HIGHLANDS GOLF COURSE, LLC KIRK W HILL 5600 E MULLEN POST FALLS ID 83854		KIRK W HILL 5600 E MULLEN POST FALLS ID 83854			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KIRK W HILL	Street or PO Address 5047 E SHORE COVE		City POST FALLS	State ID	Country	Postal Code 83854
5. Organized Under the Laws of:  <b>ID</b> <b>W 42964</b>		6. Annual Report must be signed.*  Signature: KIRK W HILL Name (type or print): KIRK W HILL  Date: 09/28/2015 Title: MANAGER					
Processed 09/28/2015      * Electronically provided signatures are accepted as original signatures.							