

No. W 75145		Due no later than Jun 30, 2016		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 1. Mailing Address: Correct in this box if needed. HOT SPRINGS RESORTS LLC GAIL E PALEN PO BOX 127 LAVA HOT SPRINGS ID 83246		BLAKE F PALEN 255 E PORTNEUF ST LAVA HOT SPRINGS ID 83246	
				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
MEMBER	BLAKE F PALEN	2648 REED RD	HOOD RIVER	OR	97031
MEMBER	GAIL ELAINE PALEN	2648 REED RD	HOOD RIVER	OR	97031
5. Organized Under the Laws of: ID W 75145		6. Annual Report must be signed.* Signature: Gail E Palen Name (type or print): Gail E Palen Date: 04/27/2016 Title: Member			
Processed 04/27/2016		* Electronically provided signatures are accepted as original signatures.			