

No. W 43214	Due no later than Oct 31, 2017 Annual Report Form		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	1. Mailing Address: Correct in this box if needed.		JOHN F MAGNUSON 1250 NORTHWOOD CENTER CT COEUR D ALENE ID 83814			
	POWDERHORN COMMUNITIES, LLC JAMES FOXX 72248 NORTH SHORE ST, STE 103 THOUSAND PALMS CA 92276		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	JAMES L FOXX	72248 NORTH SHORE ST., STE. 10	THOUSAND PALMS	CA		92276
5. Organized Under the Laws of: ID W 43214		6. Annual Report must be signed.* Signature: James L. Foxx Name (type or print): James L. Foxx Date: 11/17/2017 Title: President				
Processed 11/17/2017		* Electronically provided signatures are accepted as original signatures.				