No. <b>W 54016</b> Return to:		Due no later than Aug 31, 2010  Annual Report Form			2. Registered Agent and Address (NO PO BOX)  CHAD VAUGHN 817 IOWA ST BOISE ID 83706  3. New Registered Agent Signature:*			
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.  HARBOR VIEW, LLC CHRISTY VAUGHN 817 W IOWA ST BOISE ID 83706 USA						
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
Manager Manager	CHAD VAUGHN CHRISTY VAUGHN		817 IOWA ST 817 IOWA ST		BOISE BOISE	ID ID	USA USA	83706 83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 54016		Signature: Christy Vaughn			Date: 06/21/2010			
		Name (type or print): Christy Vaughn			Title: Manager			
Processed 06/21/2010		* Electronically provided signatures are accepted as original signatures.						