

No. W 84291	Due no later than May 31, 2011 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.		BRIAN LUCE 310 N HERBORN POST FALLS ID 83854			
	RIVER CITY MANAGEMENT COMPANY, PLLC BRIAN LUCE 310 N HERBORN POST FALLS ID 83854		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	BRAIN LUCE	310 N HERBORN	POST FALLS	ID	USA	83854
5. Organized Under the Laws of: ID W 84291		6. Annual Report must be signed.* Signature: Frank Clovis Cpa Name (type or print): Frank Clovis Cpa		Date: 06/10/2011 Title: Cpa		
Processed 06/10/2011		* Electronically provided signatures are accepted as original signatures.				