No. W 10994		Due no later than Feb 28, 2011		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			GARRY KILLPACK 1140 N 1290 E SHELLEY ID 83274 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. KILLPACK RECREATIONAL PROPERTIES, LLC GARRY KILLPACK 1140 N 1290 E SHELLEY ID 83274 USA		1				
				[3				
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	GARRY KILLI		1140 N 1290 E		SHELLEY	ID	USA	83274
Manager Manager	TAMERA JOI DIANE KILLP		1140 N 1290 E 1140 N 1290 E		SHELLEY SHELLEY	ID ID	USA USA	83274 83274
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 10994		Signature: Garry Killpack			Date: 12/13/2010			
		Name (type or print): Garry Killpack			Title: Manager			
Processed 12/13/2010 * Electronically provided signatures are accepted as original signatures.								