No. C 105954		Due	2. Registered Ager	2. Registered Agent and Address (NO PO BOX) BETSY BARRYMORE-STOLL 383 S HULEN WY KETCHUM ID 83340 3. New Registered Agent Signature:*			
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. LA PLAYA CABO PULMO, INC. PETER J KORNBLUTH 1976 LAS CANOAS RD. SANTA BARBARA CA 93105					
4. Corporations: Enter Name	es and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasu	urer (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY DEB ZEYEN PRESIDENT PETER KORNBLUTH DIRECTOR LEIGH ANNE M ISGREEN DIRECTOR PATRICIA WRIGHT		1705 STUART ST 1976 LAS CANOAS RD. P.O. BOX 895 1705 STUART ST.	BERKELEY SANTA BARBARA SODA SPRINGS BERKELEY	CA CA CA CA	USA USA USA USA	94703 93105 95728 94703	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 105954		Signature: PETE Name (type or p		Date: 03/15/2016 Title: PRES.			
Processed 03/15/2016		* Electronically pro	vided signatures are accepted as original	l signatures.			