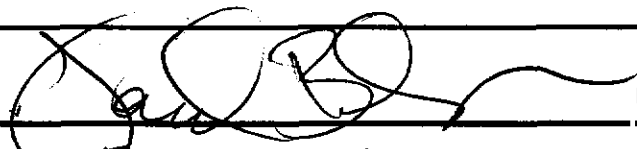


No. W 11592	Reinstatement Annual Report Form ADMIN DISSOLVED 06/14/2011		2. Registered Agent and Office (NOT A P.O. BOX)																															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed.		JIM A BLASER 3710 TAMARACK DR BOISE ID 83703																															
	CRANE CREEK ASSOCIATES LLC JIM BLASER 3710 TAMARACK DRIVE BOISE ID 83703		3. <u>New</u> Registered Agent Signature.																															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																		
<table border="1"> <thead> <tr> <th>Manager or Member Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td><u>Manager</u> Member (circle one)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>James A Blaser</td> <td>3710 Tamarack</td> <td>Boise</td> <td>ID</td> <td>Ada</td> <td>83703</td> </tr> <tr> <td>Susan K Blaser</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Member Susan K Blaser</td> <td>3710 Tamarack</td> <td>Boise</td> <td>ID</td> <td>Ada</td> <td>83703</td> </tr> </tbody> </table>					Manager or Member Name	Street or PO Address	City	State	Country	Postal Code	<u>Manager</u> Member (circle one)						James A Blaser	3710 Tamarack	Boise	ID	Ada	83703	Susan K Blaser						Member Susan K Blaser	3710 Tamarack	Boise	ID	Ada	83703
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5. Organized Under the Laws of: IDAHO W 11592		6. Signature:  Date: 6-20-2011 Name (type or print): James A Blaser Title: Manager																																
Issued 06/16/2011 by CLH																																		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.