No. W 116903	Due no later than Aug 31, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	MELISSA WELLS			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	1859 N LAKEWOOD DR STE 301 COEUR D ALENE ID 83814			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LAKESIDE REAL ESTATE HOLDINGS I, LLC PETER J GRABICKI 601 W RIVERSIDE AVE SUITE 1500	3. New Registered Agent Signature:*			
	SPOKANE WA 99201				
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: 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 MELISSA W	ZELLS 717 W SPRAGUE AVE STE 800	SPOKANE	WA	USA	99201
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Melissa Wells	Date: 08/17/2016			
W 116903	Name (type or print): Melissa Wells	Title: Manager			
Processed 08/17/2016	* Electronically provided signatures are accepted as original signatures.				