

No. <b>W 53592</b>		<b>Due no later than Aug 31, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  PINE MOTEL, LLC PATRICIA L KESTER 54 E NESTER DR PINE ID 83647 USA		ALLEN KESTER 54 E NESTER DR PINE ID 83647	
				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
MEMBER	PINE RESORT LLC	54 E NESTER DR	PINE	ID	USA
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
<b>ID W 53592</b>		Signature: Patricia Kester		Date: 06/14/2010	
		Name (type or print): Patricia Kester		Title: Member	
Processed 06/14/2010		* Electronically provided signatures are accepted as original signatures.			