| No. W 11972 | | Due no later than May 31, 2012 | | 2. Registered / | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--|--|--|---|---|-------------------|-------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. MCCALL LAKEVIEW L.L.C. KATHLEEN E MALONE PO BOX 49 MCCALL ID 83638 | | KATHLEEN MALONE 2141 EASTSIDE RD MCCALL ID 83638 3. New Registered Agent Signature:* | | | | |
| RECEIVED BY DUE DATE | | | of at least one Member or Manager | | | | | |
| Office Held | Name | | of at least one Member or Manager. Street or PO Address | City | State | Country | Postal Code | |
| MANAGER MANAGER MANAGER | KATHLEEN MALONE KATHLEEN E MALONE LOREN E MALONE | | 2141 EASTSIDE DR 2141 EASTSIDE DR PO BOX 49 2141 EASTSIDE DR PO BOX 49 | MCCALL MCCALL MCCALL | ID ID ID | USA USA USA | 83638 83638 83638 | |
| 5. Organized Under the Laws of: ID W 11972 | | 6. Annual Report must be signed.* Signature: Kathleen Malone | | | Date: 0 | 3/08/2012 | | |
| | | Name (type or | Title: Manager | | | | | |
| Processed 03/08/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |