




No. <b>W 59526</b>	<b>Due no later than Feb 28, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DOUG TAMURA 1124 SANTA MARIA DR BOISE ID 83712
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> FAIRVIEW LAKES OFFICE DEVELOPMENT, LLC DOUG TAMURA 1124 SANTA MARIA DR BOISE ID 83712		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.
 

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DOUG TAMURA	1124 SANTA MARIA DR.	BOISE	ID	USA	83712
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;">             IDAHO              W 59526           </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>1/15/2015</u> </td> </tr> <tr> <td>           Name (type or print): <u>DOUGLAS TAMURA</u> </td> <td>           Title: <u>MEMBER</u> </td> </tr> </table>	Signature: 	Date: <u>1/15/2015</u>	Name (type or print): <u>DOUGLAS TAMURA</u>	Title: <u>MEMBER</u>
Signature: 	Date: <u>1/15/2015</u>				
Name (type or print): <u>DOUGLAS TAMURA</u>	Title: <u>MEMBER</u>				

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