No. C 93331	Annual Report Form Due No Later Than Novembe	- 20	ed Agent and Office N		
Return to: SECRETARY OF STATE	Mailing Address - Please Correct, If Not C	orrect >711			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LAKEHARBOR NO. 5 LOCA ROBERT SNYDER 5685 W BEACHFRONT LAN	9015	E I	D 83703	
NO FEE REQUIRED	JOOD W BEACHFRONT CANC	3. Organize	3. Organized Under the Laws of:		
*: FIRST NOTICE *	30ISE ID 8	3703 11	D <u>C</u>	90331	
	Addresses of President, Secretary and D or Names and Addresses of Managers or)		
Office held Name	Street or P.O. Address		<u>State</u>	Zip	
Plender Robert S	ayde 5685 to Dec	altront Boi	J 1	83703	
Transcer Carter L	111104 5858 6 Herbo	care por	Te	83703	
Sec. County	Edta, 5597 WHOS	or cove doi	I	8 729 3	
		1	I		
NATURE OF BUSINESS	6. I certify that this Annual F knowledge true correct a Signature	nd of inliplete.	by me and is to th	1	
SUBDIVISION MANA		har Snyder	Title Redd	,	
ISSUED: 07-06-19	996		18846		