No. <b>W 77379</b>			Due no later than Sep 30, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:			Annual Report Form		LAWSON TATE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		SANDPOI LAWSON PO BOX 6	1. Mailing Address: Correct in this box if needed.  SANDPOINT LIFESTYLES LLC LAWSON TATE PO BOX 699 PONDERAY ID 83852		310 6TH ST PONDERAY ID 83852  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	anies: Enter I	Names and Add	resses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	LAWSON	TATE	PO BOX 699	PONDERAY	ID	USA	83852	
5. Organized Under the Laws of:		6. Annual R	eport must be signed.*					
ID W 77379		Signature	Signature: Lawson Tate		Date: 10/07/2011			
		Name (ty	pe or print): Lawson Tate	Title: M	Title: Managing Member			
rocessed 10/07/2011 * Electronically provided signatures are accepted as original signatures.								