

No. <b>W 99777</b>  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>	<b>Due no later than Jan 31, 2012</b> <b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> CANEY CREEK LLC JOHN M SPIVEY 6170 S. MAIN <del>PO BOX 463</del> P.O. Box 207 DRIGGS ID 83422 Tetonian ID 83452	2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) JOHN M SPIVEY 6170 S. MAIN <del>2446 RENDEZVOUS DR</del> <del>DRIGGS ID 83422</del> Tetonian ID 83452  3. <u>New</u> Registered Agent Signature.
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**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 Member (circle one)					
<div style="text-align: right; margin-bottom: 10px;">Teton 83452</div> <div style="text-align: center;">           John Spivey MANAGER            6170 S. MAIN            P.O. Box 207            Tetonian ID 83452         </div>					

5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">IDAHO W 99777</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u><i>John Spivey</i></u></td> <td style="width: 30%;">Date: <u>12-1-11</u></td> </tr> <tr> <td>Name (type or print): <u>John Spivey</u></td> <td>Title: <u>MANAGER</u></td> </tr> </table>	Signature: <u><i>John Spivey</i></u>	Date: <u>12-1-11</u>	Name (type or print): <u>John Spivey</u>	Title: <u>MANAGER</u>
Signature: <u><i>John Spivey</i></u>	Date: <u>12-1-11</u>				
Name (type or print): <u>John Spivey</u>	Title: <u>MANAGER</u>				

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