

No. W 63374		Due no later than Jun 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. RIVER CRESS, LLC TIM SKELTON 2140 RIVERSTONE DRIVE SUITE 202 COEUR D'ALENE ID 83814		TIM SKELTON 2140 RIVERSTONE DRIVE SUITE 202 COEUR D'ALENE ID 83814			
				3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	TIM SKELTON	3951 N PLAYFAIR	COEUR D'ALENE	ID		83815	
MANAGER	JULIE REICHEL	2014 E WOODSTONE DRIVE	HAYDEN	ID	USA	83835	
MANAGER	TAYLOR REICHEL	2014 E WOODSTONE DRIVE	HAYDEN	ID	USA	83835	
MANAGER	SUSAN CHAFFEE	3500 HALEY HILL ROAD	COEUR D'ALENE	ID	USA	83814	
MANAGER	MIKE CHAFFEE	3500 HALEY HILL ROAD	COEUR D'ALENE	ID	USA	83814	
MANAGER	JONI SKELTON	3951 N PLAYFAIR	COEUR D'ALENE	ID	USA	83815	
5. Organized Under the Laws of: ID W 63374		6. Annual Report must be signed.* Signature: Tim Skelton Name (type or print): Tim Skelton Date: 04/25/2016 Title: Managing Member					
Processed 04/25/2016		* Electronically provided signatures are accepted as original signatures.					