No. <b>W 87669</b>		Due no later than Oct 31, 2011	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if ne GOOD HARBOR LLC GLENN R LEAVITT 350 SHEFFIELD CIRCLE IDAHO FALLS ID 83404	eded.	GLENN R LEAVITT 350 SHEFFIELD CIRCLE IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manag	er.	or <u>nerr</u> negistere	a rigelie of		
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
MANAGER	GLENN LEAV	/ITT 350 SHEFFIELD CIRCLE		IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of:  ID  W 87669		6. Annual Report must be signed.* Signature: Craig Sorensen Name (type or print): Craig Sorensen		Date: 11/10/2011 Title: Administrator			
Processed 11/10/2011 * Electronically provided signatures are accepted as original signatures.							