


No. W 9484	Due no later than Aug 31, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) GRANT M HEILSON 602 SADDLEBROOK DR MALAD ID 83252														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. UPTOWN MALL & APARTMENTS, L.L.C. GRANT M HEILSON 602 SADDLEBROOK DR MALAD 83252																
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Mgr</td> <td>Grant M Heilson</td> <td>602 Saddlebrook Dr</td> <td>Malad</td> <td>ID</td> <td></td> <td>83252</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Mgr	Grant M Heilson	602 Saddlebrook Dr	Malad	ID		83252
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
Mgr	Grant M Heilson	602 Saddlebrook Dr	Malad	ID		83252											
5. Organized Under the Laws of: IDAHO W 9484	6. Signature: <u></u> Date: <u>9-28-10</u> Name (type or print): <u>Grant M Heilson</u> Title: <u>Mgr</u>																
Issued 09/24/2010 by JL1 104648																	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM