No. <b>W 20380</b>		Due no later than Aug 31, 2012	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	BRUCE SIMON 665 CENTENNIAL MOUNTAIN DRIVE #11 DRIGGS ID 83422  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CREEKSIDE MEADOWS COMMERCIAL GROUP, LLC BRUCE SIMON BOX 1170 WILSON WY 83014					
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Limited Liability Compar	nies: Enter Nan	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	BRUCE SIMO	N PO BOX 1170	WILSON	WY	USA	83014	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
WY		Signature: Bruce Simon	Date: 06/20/2012				
W 20380		Name (type or print): Bruce Simon	Title: Manager				
Processed 06/20/2012	ocessed 06/20/2012 * Electronically provided signatures are accepted as original signatures.						