No. **W 28253**	**Due no later than Jan 31, 2014**	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.** LN537, LLC JOHN F. MAGNUSON 1250 NORTHWOOD CENTER CT SUITE A COEUR D'ALENE ID 83814	KRYSTI CLIFT 1250 NORTHWOOD CENTER CT SUITE A COEUR D'ALENE ID 83814 3. New 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	JOHN F MAGNUSON	PO BOX 2350	COEUR D'ALENE	ID	USA	83816
MANAGER	JAMES D MCGEE	524 E SHERMAN AVE	COEUR D'ALENE	ID	USA	83815

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 28253**	Signature: John F. Magnuson	Date: 11/26/2013
	Name (type or print): John F. Magnuson	Title: Manager

Processed 11/26/2013

* Electronically provided signatures are accepted as original signatures.