No. W 5999		Due no later than Apr 30, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JOHN MACKEY 1501 FEDERAL WAY #400 BOISE ID 83705 3. New Registered Agent Signature:*			
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed.					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	JOHN W MAC 398 S 9TH ST	VIEW POINTE INVESTORS, L.L.C. JOHN W MACKEY 398 S 9TH ST #260 BOISE ID 83702 USA					
NO FILING FEE IF	USA						
RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ente	r Names and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER SCOTT J. STEWART		291 S SHORE DRIVE # 200	EAGLE	ID	USA	83716	
	KOWALLIS	398 S. 9TH ST., STE 260	BOISE	ID	USA	83702	
MANAGER JOHN N	1ACKEY	398 S. 9TH ST., STE 260	BOISE	ID	USA	83702	
5. Organized Under the Laws of: 6. Annual Repo		must be signed.*					
ID	Signature: Jol	Signature: John W Mackey		Date: 04/20/2009			
W 5999	Name (type o	Name (type or print): John W Mackey		Title: Manager			
Processed 04/20/2009	* Electronically p	* Electronically provided signatures are accepted as original signatures.					