

<b>No. W 9846</b>	<b>Due no later than September 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b> MARCELLA CONNOLLY 350 N IDAHO LINE RD POST FALLS, ID 83854												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  SUNTREE RV PARK LLC MIKE CONNOLLY 350 N IDAHO LINE RD POST FALLS, ID 83854		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>MARCELLA CONNOLLY</td> <td>350 N. IDAHO LINE RD.</td> <td>POST FALLS,</td> <td>ID.</td> <td>83854</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	MARCELLA CONNOLLY	350 N. IDAHO LINE RD.	POST FALLS,	ID.	83854
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER	MARCELLA CONNOLLY	350 N. IDAHO LINE RD.	POST FALLS,	ID.	83854										
5. Organized Under the Laws of:  IDAHO W 9846	6. Signature <u>Marcella L. Connolly</u> Date <u>9-28-05</u> Name (Typed or Printed) <u>Marcella L. Connolly</u> Title <u>Manager</u>														