No. W 73688		Due no later than Apr 30, 2010	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTHSIDE APARTMENTS LLC PAM NELSON 2390 ROSTRON CR TWIN FALLS ID 83301	2390 ROSTRO TWIN FALLS	PAM NELSON 2390 ROSTRON CR TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER PAM NELSOI		N 2390 ROSTRON CR	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 73688		6. Annual Report must be signed.* Signature: Pam Nelson Name (type or print): Pam Nelson	Date: 02/15/2010 Title: Member				
* Electronically provided signatures are accepted as original signatures.							