

No. W 15990	Due no later than Jul 31, 2011 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. CABIN CREEK ENTERPRISES, LLC STEPHANIE L JOHNSON PO BOX 1000 CASCADE ID 83611 USA		KENNETH J POSTMA 27 RIDGE RD CASCADE ID 83611			
			3. <u>New</u> 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
MEMBER	KENNETH J POSTMA	PO BOX 522	CASCADE	ID	USA	83611
MEMBER	STEPHANIE L JOHNSON	PO BOX 776	DONNELLEY	ID	USA	83615
5. Organized Under the Laws of: ID W 15990	6. Annual Report must be signed.* Signature: Stephanie Johnson Name (type or print): Stephanie Johnson		Date: 05/19/2011 Title: Member			
Processed 05/19/2011		* Electronically provided signatures are accepted as original signatures.				