

06/17/2011 14:10 FAX 334 2282

No. W 8266	Reinstatement Annual Report Form ADMIN DISSOLVED 06/14/2011		2. Registered Agent and Office (NOT A P.O. BOX) BRIAN INABA 113 13TH AVE S NAMPA ID 83651															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0040 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CANYON CLUB L.L.C. 113 13TH AVE S NAMPA ID 83651		3. New Registered Agent Signature															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Member or Manager (circle one)</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>☒</td> <td>Brian Inaba</td> <td>424 6th Ave. S.</td> <td>Nampa</td> <td>ID</td> <td>83651</td> <td>83651</td> </tr> </tbody> </table>					Member or Manager (circle one)	Name	Street or PO Address	City	State	Country	Postal Code	☒	Brian Inaba	424 6th Ave. S.	Nampa	ID	83651	83651
Member or Manager (circle one)	Name	Street or PO Address	City	State	Country	Postal Code												
☒	Brian Inaba	424 6th Ave. S.	Nampa	ID	83651	83651												
5. Organized Under the Laws of: IDAHO W 8266		Signature: <u><i>Brian Inaba</i></u> Date: <u>6/17/11</u> Name (type or print): <u>Brian Inaba</u> Title: <u>Chief</u>																

Revised 06/17/2011 by ISH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Notes:** To ensure future mailings, the corrected address must be in Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Notes:** The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a **new** registered agent must sign in Block 3.

Block 4: Circle either Member or Manager. Enter names and business addresses of managers or members of the limited liability company. **Notes:** Do not use "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.