

| | | | | | | |
|---|--|--|--|----------------------------------|---------|-------------|
| No. W 43821 | Due no later than Oct 31, 2015 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. | | PAULA PARSONS 708 SUPERIOR ST SANDPOINT ID 83864 | | | |
| | WHITETAIL PARK, LLC CHARLENE DEHAVEN 2902 N WILLOW RD SPOKANE VALLEY WA 99206 | | 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 | CHARLENE DEHAVEN | 893 N KOOTENAI RD | SANDPOINT | ID | | 83864 |
| 5. Organized Under the Laws of: ID W 43821 | | 6. Annual Report must be signed.* Signature: Charlene Dehaven Name (type or print): Charlene Dehaven | | Date: 09/17/2015 Title: Owner | | |
| Processed 09/17/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | |