

No. <b>W 87669</b>		<b>Due no later than Oct 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  GOOD HARBOR LLC GLENN R LEAVITT 1550 ELK CREEK DR IDAHO FALLS ID 83404		GLENN R LEAVITT 350 SHEFFIELD CIRCLE IDAHO FALLS ID 83404			
				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	
MANAGER	GLENN LEAVITT	350 SHEFFIELD CIRCLE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 87669</b>		Signature: Glenn Leavitt				Date: 09/01/2016	
		Name (type or print): Glenn Leavitt				Title: Manager	
Processed 09/01/2016		* Electronically provided signatures are accepted as original signatures.					