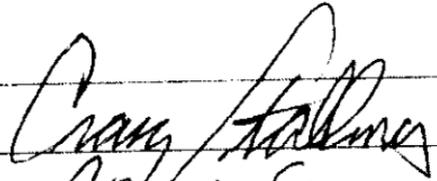


No. <b>W 20774</b>	<b>Due no later than September 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b> CRAIG BOYD STALLINGS 100 MARK LN BLACKFOOT, ID 83221		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	1. Mailing Address <b>Correct in this box, if applicable</b> LAKEVIEW PLAZA ENTERPRISES LLC PO BOX 365 BLACKFOOT, ID 83221		3. <u>New</u> Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Managers.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER MANAGER	CRAIG STALLINGS	43 WEST 215 N.	BLACKFOOT	ID	83221
5. Organized Under the Laws of: IDAHO W 20774	6. Signature  Name <small>(Typed or printed)</small> CRAIG STALLINGS		Date 7-18-05 Title MEMBER MANAGER		

Issued 07/05/2005

Do Not Tape or Staple

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