

No. <b>W 73818</b>		<b>Due no later than Apr 30, 2018</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  WATER'S EDGE MANAGEMENT, LLC KATRIN THOMPSON PO BOX 1018 CASCADE ID 83611-1018		KATRIN THOMPSON 620 N MAIN ST CASCADE ID 83611			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	ASHLEY THOMPSON	PO BOX 1018	CASCADE	ID	83611		
MEMBER	KATRIN THOMPSON	PO BOX 1018	CASCADE	ID	83611		
5. Organized Under the Laws of:  <b>ID</b> <b>W 73818</b>		6. Annual Report must be signed.*  Signature: Katrin Thompson Name (type or print): Katrin Thompson					
		Date: 05/21/2018 Title: Owner					
Processed 05/21/2018      * Electronically provided signatures are accepted as original signatures.							