

No. W 73031		Due no later than Apr 30, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. LAKEVIEW, LLC FOSTER W CLINE 374 SUNNYSIDE UP SANDPOINT ID 83864-9481		FOSTER W CLINE JR 374 SUNNYSIDE UP SANDPOINT ID 83864-9481 USA	
				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	FOSTER W CLINE JR	374 SUNNYSIDE UP	SANDPOINT	ID	USA 83864
5. Organized Under the Laws of: ID W 73031		6. Annual Report must be signed.* Signature: Foster Cline Name (type or print): Foster Cline Date: 02/25/2014 Title: President			
Processed 02/25/2014		* Electronically provided signatures are accepted as original signatures.			