

No. W 27397

Due no later than December 31, 2007  
Annual Report Form

2. Registered Agent and Office NO PO BOX

H JAMES MAGNUSON  
1250 NORTHWOOD CTR CT STE A  
COEUR D ALENE, ID 83814

3. New Registered Agent Signature

Return to:  
SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

MAGNUSON MICA BAY, L.L.C.  
H JAMES MAGNUSON  
P O BOX 2288  
COEUR D ALENE, ID 83816

NO FILING FEE IF  
RECEIVED BY DUE DATE

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>
Manager	H. James Magnuson	Box 2288	CDN	ID	83816

5. Organized Under the Laws of:  
IDAHO  
W 27397

6.

Signature

*H. James Magnuson*

Date

10-16-07

Name

(Typed or  
Printed)

H. James Magnuson

Title

Manager

Issued 10/01/2007

Do Not Tape or Staple

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