
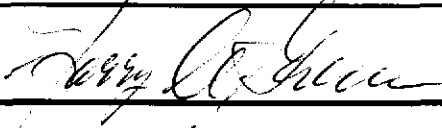
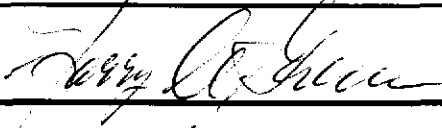
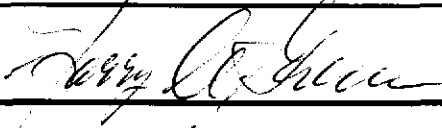


No. W 19598	Reinstatement Annual Report Form ADMIN DISSOLVED 07/22/2011		2. Registered Agent and Office (NOT A P.O. BOX) John F. Magnuson Need to Appoint 1250 Northwood Center Crt Suite A Coeur d'Alene, ID 83814																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. POST FALLS LANDING MANAGEMENT, L.L.C. WITHERSPOON KELLEY 608 NW BVD STE 300 COEUR D ALENE ID 83814-2246 655 West Waterside Dr. Post Falls, ID 83854		3. New Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Manager or Member</th> <th style="width: 30%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Manager (circle one)</td> <td colspan="6"></td> </tr> <tr> <td></td> <td>Harry A. Green, Mgr Rep/Contact (Pres.)</td> <td>918 S. Lincoln</td> <td>Spokane</td> <td>WA</td> <td></td> <td>99204</td> </tr> <tr> <td></td> <td>Jann H. Green, Sec./Treasurer</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Harry A. Green & Associates, LLC, Manager</td> <td>655 W. Waterside Dr.</td> <td>Post Falls</td> <td>ID</td> <td></td> <td>83854</td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager (circle one)								Harry A. Green, Mgr Rep/Contact (Pres.)	918 S. Lincoln	Spokane	WA		99204		Jann H. Green, Sec./Treasurer							Harry A. Green & Associates, LLC, Manager	655 W. Waterside Dr.	Post Falls	ID		83854
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Issued 12/20/2011 by DK1																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.

Note: To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a **new** registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** **Do not** put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.