| No. <b>W 11972</b>   |            | Due no later than May 31, 2018  |                      | 2 | 2. Registered Agent and Address (NO PO BOX)   |       |         |             |
|--|------------|---|----------------------|---|---|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |            | Annual Report Form  1. Mailing Address: Correct in this box if needed.  MCCALL LAKEVIEW L.L.C.  KATHLEEN E MALONE PO BOX 49 MCCALL ID 83638 |                      |   | KATHLEEN MALONE 2141 EASTSIDE RD MCCALL ID 83638  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar   |            | mes and Addresses of at least one Member or Manager.  |                      |   |   |       |         |             |
| Office Held  | Name       | ries and radiesses of   | Street or PO Address |   | City  | State | Country | Postal Code |
| MANAGER  | KATHLEEN N | 1ALONE  | 2141 EASTSIDE DR     |   | MCCALL  | ID    |         | 83638       |
| 5. Organized Under the Laws of:  ID  W 11972                                       |            | 6. Annual Report must be signed.* Signature: Kathleen Malone Name (type or print): Kathleen Malone  |                      |   | Date: 04/09/2018<br>Title: manager  |       |         |             |
| Processed 04/09/2018   |            | * Electronically provided signatures are accepted as original signatures.   |                      |   |   |       |         |             |