

No. W 41406		Due no later than Jul 31, 2009		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. CAVE FALLS RETREATS, LLC KEVIN STEVENS 1438 POTPOURRI DR ASHTON ID 83440		WILLIAM FORSBERG 49 PROFESSIONAL PLAZA REXBURG ID 83440			
				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	KEVIN STEVENS	1438 POTPOURRI DR	ASHTON	ID	USA	83440	
MEMBER	STACEY STEVENS	1438 POTPOURRI DR	ASHTON	ID	USA	83440	
5. Organized Under the Laws of: ID W 41406		6. Annual Report must be signed.* Signature: Stacey Stevens Name (type or print): Stacey Stevens Date: 08/18/2009 Title: Owner/officer					
Processed 08/18/2009		* Electronically provided signatures are accepted as original signatures.					