

No. W 51186	Due no later than 5/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		PETER J SMITH IV 250 NORTHWEST BLVD STE 102 COEUR D'ALENE ID 83814	
	ASPEN RIDGE #4, LLC MARK J RAY SR. 17917 LITTLE SPOKANE DR. 717 W Sprague COLBERT WA 99005 Ave, Suite 1600 Spokane, WA 99201		3. New 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 Zip
Manager	Mark J. Ray, Sr.	17917 Little Spokane Dr.,	Colbert,	WA 99005
Manager	Barbara Ray,	17917 Little Spokane,Dr.,	Colbert,	WA 99005
5. Organized Under the Laws of: ID W 51186		6. Annual Report must be signed. Signature: <u>Mark J. Ray</u> Date: _____ Name(type or print): <u>Mark J. Ray, Sr., Manager</u> Title: <u>Manager</u>		