

No. W 27397	Due no later than Dec 31, 2011 Annual Report Form		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	1. Mailing Address: Correct in this box if needed.		H JAMES MAGNUSON 1250 NORTHWOOD CTR CT STE A COEUR D'ALENE ID 83814			
	MAGNUSON MICA BAY, L.L.C. H JAMES MAGNUSON P O BOX 2288 COEUR D ALENE ID 83816		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
MANAGER	H JAMES MAGNUSON	P O BOX 2288	COEUR D'ALENE	ID	USA	83816
5. Organized Under the Laws of: ID W 27397		6. Annual Report must be signed.* Signature: H. James Magnuson Name (type or print): H. James Magnuson Date: 11/28/2011 Title: Manager				
Processed 11/28/2011		* Electronically provided signatures are accepted as original signatures.				