

No. W 28810		Due no later than Feb 28, 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		1. Mailing Address: Correct in this box if needed. LOST CREEK ESTATES, L.L.C. TRACY M WALDO 1831 LOST SPRINGS RANCH RD POST FALLS ID 83854		TRACY WALDO 1831 LOST SPRINGS RANCH RD POST FALLS ID 83854			
NO FILING FEE IF RECEIVED BY DUE DATE				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	NORMAN G WALDO	1831 LOST SPRINGS RANCH RD	POST FALLS	ID	USA	83854	
MEMBER	TRACY M WALDO	1831 LOST SPRINGS RANCH RD	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of: ID W 28810		6. Annual Report must be signed.* Signature: Tracy M Waldo Name (type or print): Tracy M Waldo Date: 12/13/2010 Title: Member					
Processed 12/13/2010 * Electronically provided signatures are accepted as original signatures.							