No. W 65792		Due no later than Aug 31, 2009	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	SIMA MUROFF 112 N 3RD ST MCCALL ID 83638 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. FALLS AT SAVAGE LAKE, LLC (THE) SIMA MUROFF PO BOX 2988 MCCALL ID 83638					
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Limited Liability Compa	anies: Enter Nam	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER SIMA MURO		F PO BOX 2988	MCCALL	ID	USA	83638	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 65792		Signature: Sima Muroff	Date: 09/14/2009				
		Name (type or print): Sima Muroff	Title: Manager				
Processed 09/14/2009	rocessed 09/14/2009 * Electronically provided signatures are accepted as original signatures.						