

No. W 18455		Due no later than Mar 31, 2007 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. TUSCANY PROPERTY MANAGEMENT, LLC ALLYSON BURNHAM 444 HOSPITAL WAY STE 555 POCATELLO ID 83201		BRAD FRASURE 444 HOSPITAL WAY STE 777 POCATELLO ID 83201			
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	BRAD FRASURE	444 HOSPITAL WAY, SUITE 555		POCATELLO	ID	83201	
MEMBER	BILLY B ISLEY	444 HOSPITAL WAY, SUITE 555		POCATELLO	ID	83201	
5. Organized Under the Laws of: IDAHO W 18455		6. Annual Report must be signed.* Signature: Brad Frasure Name (type or print): Brad Frasure Date: 04/09/2007 Title: Member					
Processed 04/09/2007 * Electronically provided signatures are accepted as original signatures.							