

No. <b>W 73031</b>		<b>Due no later than Apr 30, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  LAKEVIEW, LLC FOSTER W CLINE 374 SUNNYSIDE UP SANDPOINT ID 83864-9481		FOSTER W CLINE JR 374 SUNNYSIDE UP SANDPOINT ID 83864-9481 USA			
				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	FOSTER W CLINE JR	374 SUNNYSIDE UP	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 73031</b>		Signature: Foster W. Cline Jr				Date: 03/24/2012	
		Name (type or print): Foster W. Cline Jr				Title: Manager	
Processed 03/24/2012		* Electronically provided signatures are accepted as original signatures.					