No. W 27471		Due no later than Dec 31, 2011		2. Registered Age	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. MAGNUSON GLEN EYRIE, L.L.C. DENNIS O'BRIEN P O BOX 469 WALLACE ID 83873		1250 NORTHW	H JAMES MAGNUSON 1250 NORTHWOOD CTE CT STE A COEUR D'ALENE ID 83814			
				3. <u>New</u> Registered	3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Compan	ies: Enter Nar	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
	H.F. MAGNUSON JOHN F MAGNUSON		P O BOX 469 P.O. BOX 2350	Wallace Coeur d'Alene	ID ID	USA USA	83873 83816	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 27471		Signature: John F. Magnuson			Date: 10/11/2011			
		Name (type or print): John F. Magnuson			Title: Manager			
Processed 10/11/2011	* Electronically provided signatures are accepted as original signatures.							