

No. W 5548	Due no later than Feb 28, 2009 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		CORINNE TEIGEN 679 TROY IDAHO FALLS ID 83402			
	RIVERVIEW RESIDENTIAL, LLC CORINNE TEIGEN 679 TROY IDAHO FALLS ID 83402		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	CORINNE TEIGEN	679 TROY	IDAHO FALLS	ID	USA	83402
MEMBER	OLGA GALARZA	679 TROY	IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of: ID W 5548		6. Annual Report must be signed.* Signature: W Brian Haderlie Name (type or print): W Brian Haderlie Date: 02/09/2009 Title: Cpa				
Processed 02/09/2009		* Electronically provided signatures are accepted as original signatures.				