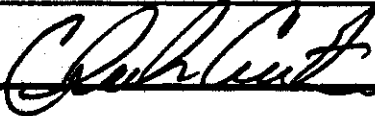


FILED EFFECTIVE

No. W 36432	Reinstatement Annual Report Form ADMIN DISSOLVED 05/05/2006		2. Registered Agent and Office (NOT A P.O. BOX) CHARLES CURTIS														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. VISTA HEIGHTS, LLC CHARLES CURTIS PO BOX 490 HAILEY ID 83333		XXXXXX XXXXXXXX XXXXXX XXXXXXXX XXXXXX XXXXXXXX 393 Motherlode Loop Hailey, ID 83333 3. New Registered Agent Signature														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Charles Curtis</td> <td>393 Motherlode Loop,</td> <td>Hailey,</td> <td>ID</td> <td>83333</td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal	Manager	Charles Curtis	393 Motherlode Loop,	Hailey,	ID	83333	
Office Held	Name	Street or PO Address	City	State	Country	Postal											
Manager	Charles Curtis	393 Motherlode Loop,	Hailey,	ID	83333												
5. Organized Under the Laws of: IDAHO W 36432		6. Signature:  Date: 2-6-08 Name (type or print): Charles Curtis Title: Mgr															
Issued 01/30/2008 by NLB																	

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SECRETARY OF STATE
STATE OF IDAHO**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.