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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------------------|
| No. <b>W 49096</b>                                                                                                                                     |                | <b>Due no later than Mar 31, 2015</b>                                                                                                                                         |        | 2. Registered Agent and Address <b>(NO PO BOX)</b> |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>PANORAMA VISTAS, LLC<br>BRYCE N WALKER<br>3920 S MILL RD<br>EMMETT ID 83617 |        | BRYCE N WALKER<br>3920 S MILL RD<br>EMMETT 83617   |                     |
|                                                                                                                                                        |                |                                                                                                                                                                               |        | 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                                                                                                                                                | BRYCE N WALKER | 3920 S MILL RD                                                                                                                                                                | EMMETT | ID                                                 | 83617               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 49096</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Bryce Walker<br>Name (type or print): Bryce Walker<br>Date: 01/17/2015<br>Title: manager                                      |        |                                                    |                     |
| Processed 01/17/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                     |        |                                                    |                     |