

No. W 62390	Due no later than May 31, 2012 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. LOST RIVER RACQUETBALL, LLC MONTE M MACCONNELL PO BOX 166 ARCO ID 83213	ALLAN R BOSCH 205 N 10TH ST 4TH FL BOISE ID 83702 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
MEMBER	MONTE M MACCONNELL	PO BOX 166	ARCO ID USA 83213
5. Organized Under the Laws of: ID W 62390	6. Annual Report must be signed.* Signature: Monte M MacConnell Name (type or print): Monte M MacConnell		Date: 03/13/2012 Title: Member
Processed 03/13/2012		* Electronically provided signatures are accepted as original signatures.	