No. <b>W 38061</b>		Due no later than Mar 31, 2011	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE	1 Ma	Annual Report Form  1. Mailing Address: Correct in this box if needed.  CITY CREEK ESTATES, LLC  RON L MILLER  1556 CITY CREEK ROAD  POCATELLO ID 83204		RONALD L MILLER 1556 CITY CREEK ROAD POCATELLO ID 83204  3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CITY CF RON L 1556 CI						
NO FILING FEE IF RECEIVED BY DUE DATI	E						
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Nam	e	Street or PO Address	City	State	Country	Postal Code	
	ALD L MILLER DRAH L MILLER	1556 CITY CREEK ROAD 1556 CITY CREEK ROAD	POCATELLO POCATELLO	ID ID	USA USA	83204 83204	
5. Organized Under the Laws of	f: 6. Annual	6. Annual Report must be signed.*					
ID	Signatu	ıre: Ron Miller	D	Date: 01/14/2011			
W 38061	Name (	Name (type or print): Ron Miller Title: Member					
Processed 01/14/2011	* Electroni	* Electronically provided signatures are accepted as original signatures.					