

No. W 75145		Due no later than Jun 30, 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		1. Mailing Address: Correct in this box if needed. HOT SPRINGS RESORTS LLC GAIL E PALEN PO BOX 127 LAVA HOT SPRINGS ID 83246 USA		BLAKE F PALEN 255 E PORTNEUF AVE LAVA HOT SPRINGS ID 83246			
NO FILING FEE IF RECEIVED BY DUE DATE				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	BLAKE F PALEN	2648 REED RD	HOOD RIVER	OR	USA	97031	
MEMBER	GAIL ELAINE PALEN	2648 REED RD	HOOD RIVER	OR	USA	97031	
5. Organized Under the Laws of: ID W 75145		6. Annual Report must be signed.* Signature: Gail Palen Name (type or print): Gail Palen					
		Date: 04/16/2012 Title: Co-owner					
Processed 04/16/2012 * Electronically provided signatures are accepted as original signatures.							