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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------|----------------|--------------------------------------------------------|------------------|-------------|--|
| No. <b>W 3799</b>                                                                                                                                      |                 | <b>Due no later than Mar 31, 2012</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>                                                            |                | LEAH MOULTON<br>130 N WOODRUFF<br>IDAHO FALLS ID 83401 |                  |             |  |
|                                                                                                                                                        |                 | <b>1. Mailing Address: Correct in this box if needed.</b>                            |                | 3. <u>New</u> Registered Agent Signature:*             |                  |             |  |
|                                                                                                                                                        |                 | STARLITE APARTMENTS, LLC<br>ALIDA E MOULTON<br>PO BOX 319<br>PLEASANT GROVE UT 84062 |                |                                                        |                  |             |  |
| 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                                                                                                                                                | ALIDA E MOULTON | P.O. BOX 319                                                                         | PLEASANT GROVE | UT                                                     | USA              | 84057       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                    |                |                                                        |                  |             |  |
| <b>ID<br/>W 3799</b>                                                                                                                                   |                 | Signature: Alida Moulton                                                             |                |                                                        | Date: 05/24/2012 |             |  |
|                                                                                                                                                        |                 | Name (type or print): Alida Moulton                                                  |                |                                                        | Title: Manager   |             |  |
| Processed 05/24/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.            |                |                                                        |                  |             |  |