

No. W 13818	Due no later than Dec 31, 2001 Annual Report Form		2. Registered Agent and Office 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 applicable		STEVEN CARLSON 1767 PENINSULA HOPE, ID 83836												
	ISLAND VIEW RESORT, LLC 1767 PENINSULA HOPE, ID 83836														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" style="width: 100%;"> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> <tr> <td>MANAGER-</td> <td>MISHA VAN BOOVEN</td> <td>1717 Peninsula</td> <td>Hope</td> <td>10460</td> <td>83836</td> </tr> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER-	MISHA VAN BOOVEN	1717 Peninsula	Hope	10460	83836
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER-	MISHA VAN BOOVEN	1717 Peninsula	Hope	10460	83836										
5. Organized Under the Laws of: IDAHO W 13818	6. Signature <u>Steve Carlson</u> Date <u>10-21-01</u> Name <small>(Typed or Printed)</small> <u>Steve Carlson</u> Title <u>President</u>														