

No. <b>C 162369</b>		<b>Due no later than Sep 30, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> COLDWATER CREEK THE SPA INC. MONA TAX DEPT ONE COLDWATER CREEK DR SANDPOINT ID 83864		FORD ELSAESSER 102 S EUCLID STE 307 SANDPOINT ID 83864		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	NURIA MCCLURE	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
TREASURER	L MICHELLE CARLONE	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
PRESIDENT	GERARD EL CHAAR	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
5. Organized Under the Laws of:  <b>ID C 162369</b>		6. Annual Report must be signed.* Signature: L Michelle Carlone Name (type or print): L Michelle Carlone  Date: 07/09/2010 Title: Treasurer				
Processed 07/09/2010		* Electronically provided signatures are accepted as original signatures.				