

No. <b>W 10520</b>		<b>Due no later than Dec 31, 2012</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>		MICHAEL P LAPLANTE 246 3RD ST ST. MARIES ID 83861			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		LAPLANTE DEVELOPMENT LIMITED LIABILITY CO. MICHAEL P LAPLANTE PO BOX 581 ST. MARIES ID 83861-0581					
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	MICHAEL P LAPLANTE	801 VETERANS DRIVE	ST. MARIES	ID	USA	83861	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 10520</b>		Signature: Michael Lapalnte			Date: 01/10/2013		
		Name (type or print): Michael Lapalnte			Title: Manager		
Processed 01/10/2013		* Electronically provided signatures are accepted as original signatures.					