No. W 100499 Return to:		Due no later than Feb 29, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. QUAIL HAVEN, LLC ROBERT J SEVY PO BOX 24 STANLEY ID 83278 USA		2. Registered Agent and Address (NO PO BOX) ROBERT J SEVY 60 LODGEPOLE LN STANLEY ID 83278 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compar	nies: Enter Na	mes and Addresses of at	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	ROBERT J SEVY		PO BOX 24 60 LODGEPOLE LANE	STANLEY	ID	USA	83278
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Robert J.	Date: 01/09/2012				
W 100499		Name (type or print)	Title: Member				
Processed 01/09/2012	rocessed 01/09/2012 * Electronically provided signatures are accepted as original signatures.						