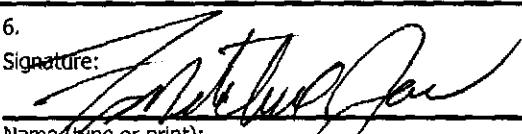


No. W 7210	Due no later than Oct 31, 2014 Annual Report Form					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. CENTENNIAL MOUNTAIN PROPERTIES LLC F MITCHELL JACOBS 2496 N 2375 E HAMER ID 83425	2. Registered Agent and Office (NOT A P.O. BOX) F MITCHELL JACOBS 2496 N 2375 E HAMER ID 83425				
NO FILING FEE IF RECEIVED BY DUE DATE	3. New Registered Agent Signature.					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	F. Mitchell Jacobs 2496N.2375E. Hamer ID Jefferson 83425					
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Kirk M. Jacobs P. O. Box 119 Hamer ID Jefferson 83425					
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Marilyn Fife P.O.Box 225 Island Park ID Fremont 83429					
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of:	6.					
IDAHO W 7210	 Signature: Name (type or print): F. Mitchell Jacobs					
			Date:	<u>9-9-14</u>		
			Title:	<u>Pres.</u>		

Issued 08/19/2014 by JAH

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM