

No. W 107064		Due no later than Sep 30, 2018		Annual Report Form		2. Registered Agent and Address (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 needed. BROKEN SPOKE ACRES, L.L.C. LADONNA M ANDREWS 1096 N EASTLAND DR STE 200 TWIN FALLS ID 83301		LADONNA M ANDREWS 3841N 1900E BROKEN SPOKE ACRES FILER ID 83328-5243		3. <u>New</u> Registered Agent Signature:*	
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	LAWRENCE H ANDREWS	3841 N 1900 E BROKEN SPOKE ACRES	FILER	ID	USA	83328-5243	
5. Organized Under the Laws of: ID W 107064		6. Annual Report must be signed.* Signature: Bethany Griggs Name (type or print): Bethany Griggs Date: 08/29/2018 Title: Bookkeeper					
Processed 08/29/2018		* Electronically provided signatures are accepted as original signatures.					