No. <b>W 69291</b>	Du	Due no later than Dec 31, 2013			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		TYRONE H STAVENAU 4645 N CHELMSFORD AVE				
700 WEST JEFFERSON PO BOX 83720 POISE ID 83720-0080 TVMACS L.L TYRONE H				BOISE ID 83713-0733				
		BOISE ID 83713-0733 USA		3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	USA							
4. Limited Liability Companies: Ente	r Names and Addresse	es of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
MANAGER TYRONE	H STAVENAU	4645 N CHELMSFORD AVE	BOISE	ID	USA	83713-0733		
MEMBER SUSAN L STAVENAU		4645 N CHELMSFORD AVE	BOISE	ID	USA	83713-0733		
5. Organized Under the Laws of: 6. Annual Rep		t must be signed.*						
ID	Signature: Ty	Signature: Tyrone H. Stavenau		Date: 10/20/2013				
W 69291	Name (type o	Name (type or print): Tyrone H. Stavenau		Title: Manager				
Processed 10/20/2013	* Electronically provided signatures are accepted as original signatures.							