



# Idaho Limited Liability Company Annual Report Form

File online at: [sos.idaho.gov](http://sos.idaho.gov)

Due no later than: 12/31/2019

Return completed form within 30 days to:

Idaho Secretary of State  
Attn: Annual Reports  
450 North 4th Street  
Boise, ID 83720  
Phone: (208) 334-2300

B0423-2516 12/18/2019 9:45 AM Received by ID Secretary of State Lawrence Denney

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 585227

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 12/22/2017

Formation Locale: ID

**Name and Mailing Address:**

(1) Add or Change Mailing Address:

POWER PULLERS, LLC  
3791 E 620 N  
RIGBY, ID 83442-5011

**Registered Agent (RA) and Registered Office (RO) Address:**

(2) Change RA and/or RO Address:

DAVID FRANCK  
3791 E 620 N  
RIGBY, ID 83442

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

*If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.*

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	DAVID FRANCK	3791 E 620 N	RIGBY, ID 83442
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	LINDA LEE FRANCK	3791 E. 620 N.	RIGBY, ID. 83442
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature: David Franck

(6) Date: 12-16-2019

(7) Type/Print Name: DAVID FRANCK

(8) Title: OWNER - OPERATOR

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.