

**W 16239**  
**No.**

**Due no later than Aug 31, 2002**

**Annual Report Form**

**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 applicable**

**SAUREY FLORAL, LLC**

2997 W 4000 N

REXBURG, ID 83440

**2. Registered Agent and Office NO PO BOX**

**MARILYN SAUREY**

2997 W 4000 N

REXBURG, ID 83440

**3. New Registered Agent Signature**

**4. Limited Liability Companies: Enter Names and Addresses of Members.**

Office held

Name

Street or P.O. Address

City

State

Zip

Registered Agent Marilyn Saurey 2997 W 4000 N

Rexburg ID 83440

Registered Agent Quinn Saurey 2997 W 4000 N.

Rexburg ID 83440

**5. Organized Under the Laws of:**

**IDAHO**

**W 16239**

**6.**

**Signature**

**Marilyn Saurey**

**Date 8-30-2002**

**Name (Typed or  
Printed)**

**MARILYN SAUREY**

**Title Registered Agent**

**Issued 06/03/2002**

**Do Not Tape or Staple**