No. W 62123	Due no later than Apr 30, 2017 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) KAREN JOHNSON 3680 MAYWOOD DR BOISE ID 83704
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  SHEEP CREEK RANCH, L.C. KATHY R. BAKER PO BOX 219 PROVIDENCE UT 84332	
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature.  Karen Solmson
4. Limited Liability	Companies: Enter Names and Addresses of Manag	ers OR Members. See Instructions.
Manager Member Member Manager Member	Companies: Enter Names and Addresses of Manag  Name Street or PO Address Cit  Cuthy Baker; 3335 1006  Sonan Baker; 3335 1006  Sonan Baker; 20180 W side High  Ril Baker, 20180 W side High	est providence Ut 84332 · Providence Ut 84332 way, P.O. 9, Swan Jake
Manager ☐ Member ☑	il builds	<b>y</b> .
Manager  Member		
5. Organized Under the Lav IDAHO W 62123	Name (type or print):  6.  Signature: Luchy Baker  Name (type or print):	Date: 3/2/17

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

122031

Issued 02/24/2017 by SLD