No. **W 19797**	**Due no later than Jun 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.** RES/HAB PROVIDER AGENCY, LLC. (THE) BARBARA J BALL 3705 S MONTANA AVE CALDWELL ID 83605	BARBARA J BALL 3705 S MONTANA AVE CALDWELL ID 83605 3. New 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	BEVERLY TEICHERT	P.O. BOX 39	MIDDLETON	ID		83644

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 19797**	Signature: Beverly Teichert Name (type or print): Beverly Teichert	Date: 05/01/2018 Title: Administrator
Processed 05/01/2018	* Electronically provided signatures are accepted as original signatures.	