

No. W 91730		Due no later than Mar 31, 2015		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		Annual Report Form		MARK WILLMS 633 LARSON RD DESMET 83824			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		SKYLINE VALLEY RANCH LLC KELLIE L WILLMS 633 LARSON RD DESMET ID 83824 USA					
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	
MEMBER	MARK D WILLMS	21695 S MAIN ST	MEDIMONT	ID	USA	83842	
MEMBER	KELLIE LYNN WILLMS	21695 S. MAIN ST.	MEDIMONT	ID	USA	83842	
5. Organized Under the Laws of: ID W 91730		6. Annual Report must be signed.* Signature: Kellie Willms Name (type or print): Kellie Willms		Date: 01/21/2015 Title: member			
Processed 01/21/2015		* Electronically provided signatures are accepted as original signatures.					