


ent By: IDAHO SECRETARY OF STATE ; 3342080; May-9-05 1:44PM; Page 1/2

No. W 29729		Due no later than Apr 30, 2005 Annual Report Form		2. Registered Agent and Office 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 applicable)		JAN L MAXEY 2683 S BASIN CREEK AVE MERIDIAN, ID 83842	
		JAN'S COMPLETE DESIGN, LLC MERRICK TAX AND FINANCIAL SERVICES LLC 1100 GARRITY BLVD NAMPA, ID 83887		3. New Registered Agent Signature	
4. Limited Liability Companies: Enter Names and Addresses of Members.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	Jeffrey P Maxey	2683 S Basin Creek Ave	Meridian	ID	83642
	Jan Maxey	2683 S Basin Creek Ave	Meridian	ID	83642
5. Organized Under the Laws of IDAHO W 29729		6. Signature  Name (Typed or Printed) Jan MAXEY		Date 6/6/05	Title OWNER

Issued 05/09/2005 by SL1

Do Not Tape or Staple

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Fold, seal and mail this portion.

Detach at this perforation and discard this lower portion

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

BLOCK 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1

BLOCK 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho: not a Post Office Box or Personal Mail Box

BLOCK 3: Only a new registered agent must sign in Block 2.

BLOCK 4: Enter names and business addresses of president, secretary, and directors (for corporations only) or managers/members (for LLC's only). **Note:** Putting "same as last year" or "same as above" will not be accepted. Changes here will not affect the address in Block 1.

BLOCK 5: May not be altered through the use of this form.

BLOCK 6: The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.

**** The Image of this form will be available on the Internet once it is filed. DO NOT enter Social Security Numbers.**

If the (corporation/Limited Liability Company) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at www.idsos.state.id.us. However, if no timely annual report is filed, administrative action will be taken, at no cost to the (corporation/Limited Liability Company), to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301

POSTMARK DATES WILL NOT BE ACCEPTED