

|                                                                                                                                                        |               |                                                                                                                                                                            |       |                                                         |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------|---------------------|
| No. <b>W 49522</b>                                                                                                                                     |               | Due no later than Apr 30, 2015                                                                                                                                             |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b><br><b>1. Mailing Address: Correct in this box if needed.</b><br>MERIT PLANNING LLC<br>ANNE E WATSON SORENSEN<br>12074 W ALBANY<br>BOISE ID 83713 |       | ANNE E WATSON-SORENSEN<br>12074 W ALBANY<br>BOISE 83713 |                     |
|                                                                                                                                                        |               |                                                                                                                                                                            |       | 3. <u>New</u> 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 |
| MEMBER                                                                                                                                                 | ANNE E WATSON | 12074 W ALBANY                                                                                                                                                             | BOISE | ID                                                      | 83713               |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                                                          |       |                                                         |                     |
| <b>ID<br/>W 49522</b>                                                                                                                                  |               | Signature: Anne Watson Sorensen<br>Name (type or print): Anne Watson Sorensen                                                                                              |       | Date: 03/05/2015<br>Title: member                       |                     |
| Processed 03/05/2015                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                  |       |                                                         |                     |