

|  |                  |  |                   |  |                  |             |  |
|--|------------------|--|-------------------|--|------------------|-------------|--|
| No. <b>W 28398</b>   |                  | <b>Due no later than Feb 28, 2018</b>  |                   | 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>  |                   | STEVEN R PARRY<br>490 MEMORIAL DR<br>IDAHO FALLS ID 83405-8404 |                  |             |  |
|  |                  | <b>1. Mailing Address: Correct in this box if needed.</b>  |                   | 3. <u>New</u> Registered Agent Signature:*                     |                  |             |  |
|  |                  | SOUTHSIDE ASSOCIATES OF IDAHO FALLS LLC<br>CRAIG KITCHENS PR<br>7549 S WYNFORD<br>COTTONWOOD HEIGHTS UT 84121-5448 |                   |  |                  |             |  |
| 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  | CRAIG N KITCHENS | 7549 S WYNFORD   | COTTONWOOD<br>HTS | UT   | USA              | 84121-5448  |  |
| 5. Organized Under the Laws of:  |                  | 6. Annual Report must be signed.*  |                   |  |                  |             |  |
| <b>ID<br/>W 28398</b>  |                  | Signature: Craig N Kitchens  |                   |  | Date: 03/09/2018 |             |  |
|  |                  | Name (type or print): Craig N Kitchens   |                   |  | Title: Manager   |             |  |
| Processed 03/09/2018   |                  | * Electronically provided signatures are accepted as original signatures.  |                   |  |                  |             |  |