

No. W 5292		Due no later than Jan 31, 2017		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		JAMES COLEGROVE 1822 RUBY CREEK RD NAPLES ID 83847	
		1. Mailing Address: Correct in this box if needed. COLEGROVE, LLC JAMES L COLEGROVE PO BOX 22 NAPLES ID 83847		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
MANAGER	CHRISTOPHER G COLEGROVE	PO BOX 17	NAPLES	ID	83847
MANAGER	BARBARA G COLEGROVE	PO BOX 17	NAPLES	ID	83847
5. Organized Under the Laws of: ID W 5292		6. Annual Report must be signed.* Signature: jim colegrove Name (type or print): jim colegrove Date: 01/17/2017 Title: registered agent			
Processed 01/17/2017		* Electronically provided signatures are accepted as original signatures.			