



# Idaho Limited Liability Company Annual Report Form

File online at: [sosbiz.idaho.gov](http://sosbiz.idaho.gov)

Due no later than: 12/31/2020

Return completed form within 30 days of:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 335759

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 12/09/2011

Formation Locale: ID

**Name and Mailing Address:**

AILOR WHITEPINE, LLC  
1033 W MOUNT DEARY CREEK RD  
DEARY, ID 83823-8620

(1) Add or Change Mailing Address:

**Registered Agent (RA) and Registered Office (RO) Address:**

Larry G Ailor  
1033 W MT DEARY CREEK ROAD  
DEARY, ID 83823

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Larry Ailor	1033 W MT Deary Creek Rd	Deary ID 83823
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

*Larry Ailor*

(6) Date:

1-15-2021

(7) Type/Print Name:

Larry G Ailor

(8) Title:

Manager

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0572-0672 01/22/2021 12:53 PM Received by ID Secretary of State Lawrence Denney