No. W 162987 Return to:		Due no later than Feb 28, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. NELSON BROTHERS TIMBER MANAGEMENT LLC 20 BUTLER DR ST MARIES ID 83861 USA		2. Registered Agent and Address (NO PO BOX) REVA NELSON 20 BUTLER DR ST MARIES ID 83861-8386 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	NELSON BI 20 BUTLER						
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
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	
	R NELSON E NELSON	919 WASHINGTON AVE 20 BUTLER DRIVE	ST MARIES ST MARIES	ID ID	USA USA	83861 83861	
5. Organized Under the Laws of:	6. Annual Re	6. Annual Report must be signed.*					
ID	Signature	Signature: R		Date: 02/28/2018			
W 162987	Name (typ	Name (type or print): R		Title: Bookkeeper			
Processed 02/28/2018	* Electronical	* Electronically provided signatures are accepted as original signatures.					