

No. <b>W 70834</b>		<b>Due no later than Jan 31, 2018</b>		<b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> ANDERSON FAMILY FARM, LLC JOSEPH ANDERSON P.O. BOX 276 GENESEE ID 83832		JOSEPH ANDERSON 2219 GRELLE AVE LEWISTON ID 83501-6142		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	JOSEPH ANDERSON	2219 GRELLE AVE	LEWISTON	ID		83501-6142	
MEMBER	JAY ANDERSON	1051 BERGER RD	GENESEE	ID		83832	
MEMBER	LAUREN ANDERSON	4348 202 AVE NE	SAMMAMISH	WA		98074	
5. Organized Under the Laws of:  <b>ID W 70834</b>		6. Annual Report must be signed.* Signature: Christine Muir Name (type or print): Christine Muir Date: 01/26/2018 Title: Representative					
Processed 01/26/2018		* Electronically provided signatures are accepted as original signatures.					