

No. W 68320		Due no later than Nov 30, 2013		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 1. Mailing Address: Correct in this box if needed. HHS LLC GALE W HARDING 329 WEST 7TH SOUTH REXBURG ID 83440		GALE W HARDING 329 WEST 7TH SOUTH REXBURG ID 83440			
				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	GALE W HARDING	329 WEST 7TH SOUTH	REXBURG	ID	USA	83440	
MANAGER	D CRAIG HEINER	240 EAST MAIN ST	REXBURG	ID	USA	83440	
MANAGER	SYLVAN F SEELY	1175 SOUTH 5TH WEST	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: ID W 68320		6. Annual Report must be signed.* Signature: Gale W. Harding Name (type or print): Gale W. Harding Date: 09/29/2013 Title: Manager/President					
Processed 09/29/2013		* Electronically provided signatures are accepted as original signatures.					