



# Idaho Limited Liability Company Annual Report Form

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

Due no later than: 07/31/2019

Return completed form within 30 days to:

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: 51965

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 07/31/2000

Formation Locale: ID

**Name and Mailing Address:**

BROOKSIDE OF IDAHO L.L.C.  
824 MEADOWVIEW DR  
NAMPA, ID 83651

(1) Add or Change Mailing Address:

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

CHARLENE WHITELEY  
824 MEADOWVIEW DR  
NAMPA, ID 83651

(2) Change RA and/or RO Address:

Gary Whiteley  
824 Meadowview Dr.  
Nampa, Id 83651

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	Gary Whiteley	824 Meadowview Dr	Nampa, Id 83651
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Charlene Whiteley	824 Meadowview Dr	Nampa, Id 83651
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(5) Signature:

Gary Whiteley

(6) Date:

7/14/19

(7) Type/Print Name:

Gary Whiteley

(8) Title:

Manager

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

B0291-7465 07/29/2019 10:27 AM Received by ID Secretary of State Lawrence Denney