

No. W 13527	Due no later than Nov 30, 2012 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. CUSTOM MORTGAGE, LLC SARAH B SCHROEDER 6240 LAKE OSPREY DR SARASOTA FL 34240	SARAH SCHROEDER 460 S FITNESS PL EAGLE ID 83616	
		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	SARAH B. SCHROEDER	6240 LAKE OSPREY DRIVE	SARASOTA FL USA 34240
5. Organized Under the Laws of: ID W 13527	6. Annual Report must be signed.* Signature: Sarah B. Schroeder Name (type or print): Sarah B. Schroeder		Date: 10/08/2012 Title: Manager
Processed 10/08/2012		* Electronically provided signatures are accepted as original signatures.	