| | | Annual Report Forn Due No Later Than Novembe | | | at and Office NOT A P.O. BOX |
|---|--|--|--------------|-------------------|------------------------------|
| Return to: | 1. Mailir | ng Address - Please Correct, If Not | - | | DOELLEFELD |
| SECRETARY OF STATE 700 WEST JEFFERSON | STA | TE LINE STADIUM/S | PEEDWAY | 1025 N. | BECK : |
| PO BOX 83720 BOISE, ID 83720-0080 | JOE | G. DOELLEFELD | | POST FAL | LS ID 83854 |
| NO FEE REQUIRED | PO | BOX 1346 | | 3. Organized Unde | er the Laws of: |
| ** FINAL NOTIC | E ** POS | ST FALLS ID 3 | 33854 | ID | c 93772 |
| Corporations: Enter N Limited Liability Compa | ames and Address anies: Enter Names | ses of President, Secretary and E s and Addresses of G Managers o | Directors | | |
| Office held | <u>Name</u> | Street or P.O. Address | | City | State Zip |
| | 15 V. WA | DOELLETELD | Post Post | FAUS - | 16 ZoArto 83854 |
| AC | SU DIRE | CTOR | | | 0000 |
| AC: | SU DIRE | 6. I certify that this Angual F knowledge true correct a Signature Name (Typed or To E 2) | nd/complete. | Date _ | and is to the best of my |
| 5. | 50 D1RG | 6. I certify that this Annual F knowledge true correct a Signature | nd/complete. | Date 2 | and is to the best of my |

3.7