

No. W 49207	Due no later than Apr 30, 2014 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. SHELBY ESTATES LLC GARY R SIPE PO BOX 883 TWIN FALLS ID 83303 USA		GARY R SIPE 3531 E 3985 N KIMBERLY ID 83341			
			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	GARY R SIPE	3531 E 3985 N	KIMBERLY	ID	USA	83341
MEMBER	KATE F SIPE	3531 E 3985 N	KIMBERLY	ID	USA	83341
5. Organized Under the Laws of: ID W 49207	6. Annual Report must be signed.* Signature: Gary Sipe Name (type or print): Gary Sipe		Date: 02/13/2014 Title: Owner			
Processed 02/13/2014		* Electronically provided signatures are accepted as original signatures.				