

Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

For Office Use Only

-FILED-

File #: 0005249331

Date Filed: 5/23/2023 9:44:00 AM

Due no later than: 04/30/2023

o

Stat

Return completed form within 30 days to: Idaho Secretary of State

Annual Report: No filing fee if received by the due date.

Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

B0787-8831 05/23/2023 SOS Control Number: 102084 Filing Status: Active-Existing Limited Liability Company (D) Date Formed: 04/02/2004 Formation Locale: ID Name and Mailing Address: (1) Add or Change Mailing Address: IDARANCH EQUESTRIAN EVENT CENTER, LLC 7188 BLUFF RD NEW PLYMOUTH, ID 83655-5013 Received Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address: CHARLENE HENDRICKSON 7188 BLUFF RD NEW PLYMOUTH, ID 83655 λq 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. Ų. (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. ø Manager/Member Name **Business Address** City, State, Zip Mgr ✗ Mem BonalD 7188 Bluff hew plymout Mgr Mem Mgr Mem ☐Mgr ☐Mem Mgr Mem Mgr Mem Mgr Mem Mgr Mem gecretary Mgr Mem Mgr Mem Mgr Mem (5) Signature/

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