



Idaho Limited Liability Company Annual Report Form

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Return completed fo	rm within 30 days
Idaha Sagratan, of State	

B0079-2882 01/28 Idaho Secretary of State Due on/Before: 10/31/2018 Reporting Year: 2018 Attn: Annual Reports 450 North 4th Street Annual Report: No filing fee if received by due date. Boise, ID 83702 If reinstatement is required, the reinstatement fee is \$30.00. Phone: (208) 334-2300 Reinstate Entity (\$30 fee) SOS Control Number: 525161 Filing Status: Inactive-Dissolved (Administrative) Limited Liability Company (D) Date Formed: 10/20/2016 Formation Locale: ID Name and Mailing Address: (1) Add or Change Mailing Address: ELKHOME, LLC PO BOX 412 HAYDEN, ID 83835 Received Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address: **GREG HANCE** 900 S HRUSKA HILL DR COEUR D ALENE, ID 83814 Note: The Registered Office address must be a physical Idaho address (no postal box). (3) New Registered Agent (RA) Signature: (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. œ Manager/Member Name **Business Address** Ω City, State, Zip 30X Mgr Mem Mgr Mem Mgr Mem ☐Mgr ☐Mem Mgr Mem Mgr Mem Ø 7 ☐Mgr ☐Mem (5) Signature: (6) Date: 95-18-10 ø Lawerence (7) Type/Print Name: (8) Title: Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.