



No. W 67436	Due no later than Oct 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ADRIANNE M BOYD 10102 ALTAIR LERoy GILLIES STAR ID 83669 511 N. DEWEY AVE MIDDLETON IDAHO 83644																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. IDAHO FAST DRAW, LLC 1011 LONG 279 N TAURUS WAY LERoy GILLIES STAR ID 83669 USA 511 N. DEWEY AVE. MIDDLETON IDAHO 83644		3. New Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>LERoy GILLIES</td> <td>511 N. DEWEY AVE.</td> <td>MIDDLETON</td> <td>ID.</td> <td>USA</td> <td>83644</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>ROBER RANDOLPH</td> <td>PO. BOX 1093</td> <td>IDAHO CITY</td> <td>ID.</td> <td>USA</td> <td>83631</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	LERoy GILLIES	511 N. DEWEY AVE.	MIDDLETON	ID.	USA	83644	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	ROBER RANDOLPH	PO. BOX 1093	IDAHO CITY	ID.	USA	83631	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 67436	6. Signature:  Name (type or print): LERoy GILLIES			Date: 10-13-2013 Title: MANAGER/MEMBER																																		

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM