

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 01-04-1992

No. 994	Idaho Limited Liability Company Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 30, 1995	WILLIAM D KYLE 834 FALLS AVE STE 2030C
	1 Mailing Address -- Please Correct If Not Correct	
	VALLEY RENTALS, L.L.C. WILLIAM D KYLE 834 FALLS AVE STE 2030C	TWIN FALLS ID 83301
TWIN FALLS ID 83301	3. Organized Under The Laws of ID NO: 994	

4. Names and Addresses of ☐ Managers or ☒ Members (check one)		MUST BE PRINTED OR TYPED		
Name	Street or P.O. Address	City	State	Zip
WILLIAM D. KYLE	1132 SKYLINE DRIVE	TWIN FALLS	ID	83301
DONNA F. KYLE	1132 SKYLINE DRIVE	TWIN FALLS	ID	83301
FAY M. KEMP	1008 S. PARK AVENUE W.	TWIN FALLS	ID	83301
LAURA J. KEMP	1008 S. PARK AVENUE W.	TWIN FALLS	ID	83301
5. Signature of the Current Registered Agent (if changed in block 2) _____		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Wm. D. Kyle</u> Date <u>7-14-95</u> Name (Typed or Printed)		