| No. **W 35485** | **Due no later than Dec 31, 2016** | 2. Registered Agent and Address **(NO PO BOX)** |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br>**NO FILING FEE IF RECEIVED BY DUE DATE** | **Annual Report Form**<br>**1. Mailing Address: Correct in this box if needed.**<br>679, LLC<br>GARY B MULTANEN<br>723 GARBER ST<br>CALDWELL ID 83605<br>USA | GARY B MULTANEN<br>5296 N. BLACKBIRD WAY<br>GARDEN CITY ID 83714<br><br>3. New 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 | SUSAN M MULTANEN | 5296 N. BLACKBIRD WAY | GARDEN CITY | ID | USA | 83714 |

| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
|---|---|---|
| **ID**<br>**W 35485** | Signature: Sharlene Couture | Date: 01/23/2017 |
| | Name (type or print): Sharlene Couture | Title: Account Analyst |

Processed 01/23/2017

* Electronically provided signatures are accepted as original signatures.