No. W 7705		Due no later than Jan 31, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:	n to: Annual F			C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed. AUTUMN COVE MOBILE HOME PARK, LLC DAVID N JOHNSON PO BOX 7 REXBURG ID 83440					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DAVID N JOH			USA			
	REXBURG ID			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addresse	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER DAVID N JOHNSON		55 NORTH HILL ROAD P.O. BOX 7	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Da	Signature: David Johnson		Date: 11/16/2013			
W 7705	Name (type o	Name (type or print): David Johnson		Title: Manager			
Processed 11/16/2013	* Electronically p	* Electronically provided signatures are accepted as original signatures.					