| No. <b>W 1500</b>   |  | Due no later than Sep 30, 2014  | 2. Registered Ag                          | 2. Registered Agent and Address (NO PO BOX)  SHAWN D BOYLE 3875 AMERICAN WAY IDAHO FALLS ID 83402  3. New Registered Agent Signature:* |                   |                         |
|---|--|---|---|--|-------------------|-------------------------|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080           |  | Annual Report Form  1. Mailing Address: Correct in this box if needed.  STATIONS L.L.C.  LOGAN HALL  PO BOX 50620  IDAHO FALLS ID 83405 | 3875 AMERICA<br>IDAHO FALLS               |  |                   |                         |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Name             |  | nes and Addresses of at least one Member or Manager.  |   |  |                   |                         |
| Office Held Name  |  | Street or PO Address  | City                                      | State  | Country           | Postal Code             |
| MANAGER<br>MEMBER<br>MEMBER   | LOGAN HALL<br>BRAD H HAL<br>ANDREA HAL | PO BOX 50620<br>L PO BOX 50620  | IDAHO FALLS<br>IDAHO FALLS<br>IDAHO FALLS | ID<br>ID<br>ID   | USA<br>USA<br>USA | 83405<br>83405<br>83405 |
| 5. Organized Under the Laws of:  ID  W 1500   |  | 6. Annual Report must be signed.* Signature: Shawn Boyle Name (type or print): Shawn Boyle  | Date: 08/22/2014<br>Title: Agent          |  |                   |                         |
| rocessed 08/22/2014 * Electronically provided signatures are accepted as original signatures. |  |   |   |  |                   |                         |