

|  |                 |   |        |   |                  |             |  |
|--|-----------------|---|--------|---|------------------|-------------|--|
| No. <b>W 145595</b>  |                 | <b>Due no later than Dec 31, 2016</b>   |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |                  |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>Annual Report Form</b>   |        | GARY W CUMMINGS<br>1240 LUNDQUIST LN<br>MOSCOW ID 83843 |                  |             |  |
|  |                 | <b>1. Mailing Address: Correct in this box if needed.</b>                         |        | 3. <u>New</u> Registered Agent Signature:*              |                  |             |  |
|  |                 | CUMMINGS APARTMENTS III, LLC<br>GARY W CUMMINGS<br>PO BOX 8821<br>MOSCOW ID 83843 |        |   |                  |             |  |
| 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 |  |
| MANAGER  | GARY W CUMMINGS | 1240 LUNDQUIST LN   | MOSCOW | IS  | USA              | 83843-8002  |  |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*   |        |   |                  |             |  |
| <b>ID<br/>W 145595</b>   |                 | Signature: Gary Cummings  |        |   | Date: 10/26/2016 |             |  |
|  |                 | Name (type or print): Gary Cummings   |        |   | Title: Manager   |             |  |
| Processed 10/26/2016   |                 | * Electronically provided signatures are accepted as original signatures.         |        |   |                  |             |  |