



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 05/31/2021

Dort Form

Return completed form within 30 days to: 1 3

Idaho Secretary of State Attn: Annual Reports

			450 North 4th Street	į
Annua	Report: No filing fee if rec	eived by the due date.	d by the due date. Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 459841		Filing Status: Active-Existing		- N
Limited Liability Company (D)		Date Formed: 05/06/2014	Formation Locale: ID	
Name and Mailing Address: 7152 N. JOANNA DRIVE, LLC 416 E FOSTER AVE COEUR D ALENE, ID 83814-3045		(1) Add or Change Mailing Address:		
Registered Ag KAREN L VAU 416 E FOSTER COEUR D ALE	R AVE ENE, ID 83814		Change RA and/or RO Address:	
	Note: The Registered	l Office address must be a physical ld	aho address (no postal box).	,
(3) New Regist	tered Agent (RA) Signature:		above, the new agent must sign here to accept the a	
		d addresses of Managers OR Memb	ers. Do NOT put 'same as last year' or 'sa f more space is needed, please add an atta	me as above
Manager/Member	Name	Business Address	City, State, Zip	
Mgr Mem Mgr Mem	Eienn Alan Vaughn	ylle E Foster Av		183814 183814
(5) O'mat	// //			1
(5) Signature:	e: Karen Vauguu	(6) [itle: Manager	
(7) Type/Print Nam	e: Karen Vaughn	(8)	itle: Manager	
Instructions: Leg	jibly complete the form above. Sign	and date this form and return to the add	ess provided above.	(