No. <b>W 103718</b>		Due no later than May 31, 2013	2. Registered	2. Registered Agent and Address (NO PO BOX)  LINDA HINES 4356 N NINES RIDGE BOISE ID 83702  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.  GRACE MEMORY CARE AT ENGLEFIELD GREEN LLC LINDA HINES 4356 N NINES RIDGE BOISE ID 83702	4356 N NIN BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.	or <u>rest</u>	- Total Agente St	- Indicate:		
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	LINDA HINE	S 4356 N NINES RIDGE	BOISE	ID	USA	83702	
5. Organized Under the Laws of:  ID  W 103718		6. Annual Report must be signed.* Signature: LInda S Hines Name (type or print): LInda S Hines	Date: 07/09/2013 Title: Member				
Processed 07/09/2013 * Electronically provided signatures are accepted as original signatures.							