



Dort Form Return completed form within 30 days to: No lidaho Secretary of State **Idaho Limited Liability Company Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2021

Attn: Annual Reports

Idaho Secretary of State 450 North 4th Street

Annual Report: No filing fee if received by the due date.			Boise, ID 83720 Phone: (208) 334-2300	
		Filing Status: Active-Existing Date Formed: 09/28/2011	Formation Locale: ID	[(
Name and Mail T.A. "IS" RUNN PO BOX 7113	ling Address:		or Change Mailing Address:	
R. D. WATSON 5431 N GOVER	ent (RA) and Registered Offi I RNMENT WAY STE 101 NE, ID 83815 (KOOTENAI C		inge RA and/or RO Address:	
(4) Limited Liabili	tered Agent (RA) Signature: ty Companies: Enter names and	addresses of Managers OR Members	ove, the new agent must sign here to accept the so. Do NOT put 'same as last year' or 'sa hore space is needed, please add an att	me as above
Manager/Member	Name	Business Address	City, State, Zip	
Mgr Mem	Timothy A Buctles Timothy A Buctles Timothy A. Buctles Timothy A. Buctles	P.O. Box 7/13	Kennewick WA Kennewick WA Kennewick WA	99336 99336 99336 99336
Mgr Mem Mgr Mem Mgr Mem				
(5) Signature:	mothy A.	Buc Ho (8) Title		