

No. W 91329	Due no later than Mar 31, 2015 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DAVE CHRISTIAN 4199 S STARGAZER PL BOISE ID 83716
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HOME HUNTERS LLC DAVE CHRISTIAN 4199 S STARGAZER PL BOISE ID 83716		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> Dave Christian 4199 S Stargazer PL. Boise, ID. USA 83716			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 91329 </div>		6. Signature: <div style="font-family: cursive; font-size: large;"> x Dave Christian </div> Date: <u>3/5/15</u> Name (type or print): <div style="font-family: cursive; font-size: large;"> Dave Christian </div> Title: <div style="font-family: cursive; font-size: large;"> Owner </div>	
Issued 01/21/2015 by KAH		113556	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Check either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.