

No. <b>W 104133</b>		<b>Due no later than Jun 30, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		MURRY JIM SORENSEN 181 NW MAIN STREET BLACKFOOT ID 83221-8322			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		GABLES OF AMMON MANAGEMENT, LLC MURRAY JIM SORENSEN 181 NW MAIN STREET BLACKFOOT ID 83221					
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	MURRAY JIM SORENSEN	181 NW MAIN ST.	BLACKFOOT	ID	USA	83221	
MANAGER	JOSHUA SORENSEN	1405 CURLEW DR.	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 104133</b>		Signature: Murray Jim Sorensen			Date: 04/25/2016		
		Name (type or print): Murray Jim Sorensen			Title: Registered Agent		
Processed 04/25/2016		* Electronically provided signatures are accepted as original signatures.					