


No. W 62426	Reinstatement Annual Report Form ADMIN DISSOLVED 08/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) TODD BEEMSTER 1952 E 12TH #34 POST FALLS ID 83877
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. TRAIL BOSS RV, LLC TODD D BEEMSTER PO BOX 1659 1952 E 12th #34 POST FALLS ID 83877 Post Falls ID USA 83854		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.			
Manager <u>Member</u>	Name	Street or PO Address	City State Country Postal Code
	owner	TODD Beemster	1952 E 12th #34 Post Falls ID 83854
5. Organized Under the Laws of: <div style="text-align: center; border: 1px solid black; padding: 10px; margin: 10px auto; width: 100px;"> IDAHO W 62426 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Signature:  <hr/> Name (type or print): TODD Beemster </div> <div> Date: 1-26-11 <hr/> Title: owner </div> </div>	
Issued 01/21/2011 by SLD			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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.**