




No. W 54015	Due no later than Aug 31, 2012 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) THOMAS H BRADFORD 10674 W ANNAFAYE ST STAR ID 83669
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. BRADFORD INVESTMENTS, LLC THOMAS H BRADFORD 10674 W ANNAFAYE ST STAR ID 83669 USA		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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Tom BRADFORD	10674 W. ANNAFAYE				
Manager <input type="checkbox"/> Member <input type="checkbox"/>		STAR, ID				ADA
Manager <input type="checkbox"/> Member <input type="checkbox"/>						83669
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 54015 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>8/8/12</u> </td> </tr> <tr> <td> Name (type or print): <u>Tom BRADFORD</u> </td> <td> Title: _____ </td> </tr> </table>	Signature: 	Date: <u>8/8/12</u>	Name (type or print): <u>Tom BRADFORD</u>	Title: _____
Signature: 	Date: <u>8/8/12</u>				
Name (type or print): <u>Tom BRADFORD</u>	Title: _____				

Issued 08/08/2012 by DK1
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