



# Idaho Limited Liability Company Annual Report Form

File online at: [sosbiz.idaho.gov](http://sosbiz.idaho.gov)

Due no later than: 09/30/2021

Return completed form within 30 days:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 174213

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 09/08/2006

Formation Locale: ID

**Name and Mailing Address:**

(1) Add or Change Mailing Address:

UNIVERSAL POLY PIPE, L.L.C.

178 WEST RD

JEROME, ID 83338-5274

**Registered Agent (RA) and Registered Office (RO) Address:**

(2) Change RA and/or RO Address:

GARY CHILDERS

178 WEST RD

JEROME, ID 83338

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Mary W. Childers	178 West Road	Jerome, Idaho 83338
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Candace Childers	178 West Road	Jerome Idaho 83338
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: Mary Childers

(6) Date: 8-30-21

(7) Type/Print Name: GARY CHILDERS

(8) Title: Owner / mgr

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0626-5789 09/03/2021 1:01 PM Received by ID Secretary of State Lawrence Denney