No. <b>W 145066</b>		Due no later than Dec 31, 2015		2. Registe	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			NORMAN K SOWARDS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SOWARDS LIVING TRUST #5, LLC  NORMAN K SOWARDS  3212 W 3000 N  MOORE ID 83255		MOOR	3212 W 3000 N MOORE ID 83255-8325 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
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	
MEMBER	NORMAN KE	NT SOWARDS	3212 W, 3000 N	MOORE	ID	USA	83255	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: N K SOWARDS			Date: 10/22/2015			
W 145066		Name (type or print): N K SOWARDS			Title: trustee			
Processed 10/22/2015 * Electronically provided signatures are accepted as original signatures.								