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|--|-----------------|--|-----------|--|---------|-------------|--|
| No. W 667 | | Due no later than Dec 31, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. P-E-5 L.L.C. THOMAS F EVANS 1103 CHURCH ST SANDPOINT ID 83864 | | THOMAS EVANS 1103 CHURCH ST SANDPOINT ID 83864 | | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 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 | MARY M EVANS | 1833 CLEARVIEW POINT DR | LESISTON | ID | USA | 83501 | |
| MEMBER | CAROLYN J EVANS | 19819 10TH AVE.NW | SHORELINE | WA | USA | 98177 | |
| 5. Organized Under the Laws of: ID W 667 | | 6. Annual Report must be signed.* Signature: Thomas F Evans Name (type or print): Thomas F Evans | | | | | |
| | | Date: 11/29/2015 Title: Registered Agent | | | | | |
| Processed 11/29/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | | |