No. <b>W 4241</b>			Due no later than Jun 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		R TROY NIEL	R TROY NIELSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		HERITAGE L R TROY NI 470 SPRING		SODA SPRING	470 SPRING CREEK DR SODA SPRINGS 83276  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200		Names and Addres	sses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	R TROY I	NIELSEN	470 SPRING CREEK DRIVE	SODA SPRINGS	ID	USA	83276	
5. Organized Under the Laws of:		6. Annual Rep	6. Annual Report must be signed.*					
ID		Signature:	R. Troy Nielsen		Date: 04/20/2015			
W 4241		Name (type	Name (type or print): R. Troy Nielsen		Title: Manager			
Processed 04/20/2015 * Electronically provided signatures are accepted as original signatures.								