

| <b>No.</b> W 4285<br><br><b>Return to:</b><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b>  | <b>Annual Report Form</b><br><b>Due No Later Than November 30,</b><br><br><b>1. Mailing Address - Please Correct, If Not Correct</b><br><br>ILLUSIONS, L.L.C.<br>MELISSA A BARIL<br>4902 CHINDEN BLVD<br>BOISE ID 83714 | <b>2. Registered Agent and Office NOT A P.O. BOX</b><br><br>MELISSA A BARIL<br>4902 CHINDEN BLVD<br>BOISE ID 83714<br><br><b>3. Organized Under the Laws of:</b><br>IDAHO |                 |       |                        |      |       |     |         |                  |                    |                 |    |       |         |                |                    |                 |    |       |
|---|---|---|-----------------|-------|------------------------|------|-------|-----|---------|------------------|--------------------|-----------------|----|-------|---------|----------------|--------------------|-----------------|----|-------|
| <b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b><br><b>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Melissa A. Baril</td> <td>4902 Chinden Blvd.</td> <td>Garden City, ID</td> <td>ID</td> <td>83714</td> </tr> <tr> <td>Manager</td> <td>Patricia Hazen</td> <td>4902 Chinden Blvd.</td> <td>Garden City, ID</td> <td>ID</td> <td>83714</td> </tr> </tbody> </table> |   |   | Office held     | Name  | Street or P.O. Address | City | State | Zip | Manager | Melissa A. Baril | 4902 Chinden Blvd. | Garden City, ID | ID | 83714 | Manager | Patricia Hazen | 4902 Chinden Blvd. | Garden City, ID | ID | 83714 |
| Office held   | Name  | Street or P.O. Address  | City            | State | Zip                    |      |       |     |         |                  |                    |                 |    |       |         |                |                    |                 |    |       |
| Manager   | Melissa A. Baril  | 4902 Chinden Blvd.  | Garden City, ID | ID    | 83714                  |      |       |     |         |                  |                    |                 |    |       |         |                |                    |                 |    |       |
| Manager   | Patricia Hazen  | 4902 Chinden Blvd.  | Garden City, ID | ID    | 83714                  |      |       |     |         |                  |                    |                 |    |       |         |                |                    |                 |    |       |
| <b>5. Signature of New Registered Agent</b>   | <b>6.</b><br>Signature <u>Melissa A. Baril</u> Date <u>12/28/98</u><br>Name (Typed or Printed) <u>Melissa A. Baril</u> Title <u>Manager</u>   |   |                 |       |                        |      |       |     |         |                  |                    |                 |    |       |         |                |                    |                 |    |       |

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.  
 NOTE: The name of the business entity cannot be altered on the annual report form.
- If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to # 4 below.
- Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.  
 Limited Liability Company: Enter the names and addresses of the managers or members in block 4.  
 NOTE: Putting "same as last year" WILL NOT be accepted.
- If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.  
 Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.

**If the business entity is no longer doing business in Idaho, please contact the Secretary of State's office at (208) 334-2301 for further instructions.**

**NOTE:** The annual report must be received by the Office of the Secretary of State on or before November 30. Postmark date will not be accepted. Failure to timely file shall: (1) Subject a domestic corporation to administrative dissolution proceedings; (2) Subject a foreign corporation to proceedings to revoke its certificate of authority; or (3) Subject a limited liability company to cancellation of its articles of organization or certificate of registration.

**DUE NO LATER THAN NOVEMBER 30**