| No. W 76013 Return to: | Due no later than Jul 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. PRINCETON TAVERN, L.L.C. JACK NAGLE 1545 ROCK CREEK RD | | | 2. Registered Agent and Office (NOT A P.O. BOX) JACK NAGLE 1545 ROCK CREEK RD POTLATCH ID 83855 | | | |
|--|--|---|----------|--|---------------------------------------|------------------|-------------|
| SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | | | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | POTLATCH ID 83855 | | | 3. New Registered Agent Signature. | | | |
| 4. Limited Liability Companie Office Held Name | • | d Addresses of Managers Of Street or PO Addres | Members. | | | | |
| Member Jack | Nagle | 1545 Rock Crock | | Po+Latch | State I.D. | Country LATON | Postal Code |
| | | | | | • | | |
| | | | | | | | -ip |
| | | | • | | | #4** | |
| Organized Under the Laws IDAHO | Signature: | Jack P. M. | week | ک | , , , , , , , , , , , , , , , , , , , | Date: 5 | -7>-2016 |
| W 76013 sued 05/21/2010 by SLD | Name (type or print): Jack P. Nagle | | | | | Title:Member | |
| | UCTIONS F | OR THE TRAILS | | | | | 107357 |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: <u>Do not put "same as last year" or "same as above". These</u> will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of

** The image of this form will be available on the internet once it has been filed. DO <u>NOT</u> enter Social Security numbers.

If the Limited Liability Company is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the Limited Liability Company to terminate the legal existance. If you have any questions contact the Commercial Division at (208) 334-

POSTMARK DATES WILL NOT BE ACCEPTED