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|--|--|--|--|-----------------------------------|---------|-------------|
| No. <b>W 122932</b>  | <b>Due no later than Mar 31, 2016</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address <b>(NO PO BOX)</b>             |                                   |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>DIFFERENT PROPERTY MANAGEMENT LLC<br>467 CONSTITUTION WAY<br>IDAHO FALLS ID 83402 |  | LAUNIE SHELMAN<br>467 CONSTITUTION WAY<br>IDAHO FALLS ID 83402 |                                   |         |             |
|  |  |  | 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   | LAUNIE SHELMAN   | 772 KINSWOOD   | IDAHO FALLS  | ID                                | USA     | 83404       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 122932</b>  |  | 6. Annual Report must be signed.*<br>Signature: Launie Shelman<br>Name (type or print): Launie Shelman |  | Date: 01/25/2016<br>Title: Member |         |             |
| Processed 01/25/2016   |  | * Electronically provided signatures are accepted as original signatures.                              |  |                                   |         |             |