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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------------------|
| No. <b>W 60374</b>                                                                                                                                     |         | <b>Due no later than Mar 31, 2018</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>Annual Report Form</b>                                                                                                                        |       | LARRY CRAWFORD<br>575 W DREYFUSS<br>MERIDIAN ID 83646 |                     |
|                                                                                                                                                        |         | <b>1. Mailing Address: Correct in this box if needed.</b><br>CRAWFORD PROPERTY MANAGEMENT, LLC<br>LARRY CRAWFORD<br>PO BOX 124<br>EAGLE ID 83616 |       | 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 |
| MANAGER                                                                                                                                                | DLC INC | PO BOX 124                                                                                                                                       | EAGLE | ID                                                    | 83616               |
| 5. Organized Under the Laws of:                                                                                                                        |         | 6. Annual Report must be signed.*                                                                                                                |       |                                                       |                     |
| <b>ID<br/>W 60374</b>                                                                                                                                  |         | Signature: Larry Crawford                                                                                                                        |       | Date: 01/26/2018                                      |                     |
|                                                                                                                                                        |         | Name (type or print): Larry Crawford                                                                                                             |       | Title: President                                      |                     |
| Processed 01/26/2018                                                                                                                                   |         | * Electronically provided signatures are accepted as original signatures.                                                                        |       |                                                       |                     |