No. W 43864		Due no later than Oct 31, 2014			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. CASTLECREEK ENTERPRISES, LLC CHERYL S WELLS 11460 KARCHER RD NAMPA ID 83651		1 N	CHERYL S WELLS 11460 KARCHER RD NAMPA 83651 3. New Registered Agent Signature:*			
NO FILING FE RECEIVED BY DU	E DATE	mes and Addresses of	at least one Member or Manager.					
Office Held	Name	mes and Addresses of t	Street or PO Address	Cit	ty	State	Country	Postal Code
MEMBER SHAWN LYONS MEMBER CHERYL S WELLS MEMBER DUANE J WELLS		WELLS	11458 KARCHER RD 11460 KARCHER RD 11460 KARCHER RD	NA NA	MPA MPA MPA	ID ID ID	USA	83651 83651 83651
5. Organized Under the Laws of: ID W 43864		6. Annual Report must be signed.* Signature: CHERYL S WELLS Name (type or print): CHERYL S WELLS			Date: 10/20/2014 Title: MEMBER			
Processed 10/20/2014		* Electronically provide	ed signatures are accepted as origina	l signatur	es.			