

No. W 8337		Due no later than Mar 31, 2016		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. C K P FARMS, LLC KATHLEEN KOON 7455 W 4000 S REXBURG ID 83440		KATHLEEN KOON 7455 W 4000 S REXBURG ID 83440	
				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	KATHLEEN KOON	7455 W 4000 S	REXBURG	ID	83440
MANAGER	COLENE WILSON	3654 W 6800 S	REXBURG	ID	83440
MANAGER	JASON SMITH	159TH ST SW	EDMONDS	WA	98026
MANAGER	AC SMITH	3263 W 5200 S	REXBURG	ID	83440
MANAGER	ANGELA SMITH	1411 W 7TH AVE APT 1	SPOKANE	WA	99204
5. Organized Under the Laws of: ID W 8337		6. Annual Report must be signed.* Signature: Kathleen Koon Name (type or print): Kathleen Koon Date: 02/06/2016 Title: Manager			
Processed 02/06/2016		* Electronically provided signatures are accepted as original signatures.			