

No. <b>W 37537</b>		<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/08/2010</b>		<div style="text-align: right; font-weight: bold; font-size: 1.2em;">FILED EFFECTIVE</div> 2. Registered Agent and Office (NOT A P.O. BOX) <del>SUSAN E. CONGER</del> 4230 N BALLANTYNE LN EAGLE ID 83616																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>		1. Mailing Address: Correct in this box if needed. PIONEER PROPERTY INVESTORS, LLC <del>SUSAN CONGER</del> <b>MARY NISSEN</b> <del>4230 N BALLANTYNE LN</del> <b>3801 FROZEN DOG</b> <del>EAGLE ID 83616 USA</del> <b>ROAD</b> <b>EMMETT, ID.</b> <b>83617</b>		3. New Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																							
		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>MARY NISSEN</td> <td>3801 FROZEN DOG</td> <td>EMMETT,</td> <td>ID,</td> <td>USA</td> <td>83617</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	MARY NISSEN	3801 FROZEN DOG	EMMETT,	ID,	USA	83617	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>								
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5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-size: 1.2em;">W 37537</div>		6. Signature: Name (type or print): _____ <div style="text-align: right;">           Date: <u>5-28-13</u>            Title: _____         </div>																																					
Issued 05/28/2013 by LJC																																							

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM