No. W 139298		Due no later than Jun 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	HIGH DESER SHARMAN	Annual Report Form 1. Mailing Address: Correct in this box if needed. HIGH DESERT EQUESTRIAN CENTER, LLC SHARMAN C JANUIK 3377 ANCHOR LN TWIN FALLS ID 83301		JOHN L JANUIK 3377 ANCHOR LN TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE	TWIN FALLS			3. New Registered Agent Signature:*			
4. Limited Liability Companies: E	nter Names and Addres	sses of at least one Member or Manager.					
Office Held Nam	e	Street or PO Address	City	State	Country	Postal Code	
	rman C Januik I L Januik	3377 ANCHOR LN 3377 ANCHOR LN	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of	: 6. Annual Rep	6. Annual Report must be signed.*					
ID	Signature:	John L Januik		Date: 05/06/2015			
W 139298	Name (type	Name (type or print): John L Januik		Title: Manager			
Processed 05/06/2015	* Electronically	* Electronically provided signatures are accepted as original signatures.					