

No. W 90569	Reinstatement Annual Report Form ADMIN DISSOLVED 05/13/2011		2. Registered Agent and Office (NOT A P.O. BOX) DAVID MARSHALL 6925 E MULLAN TRAIL RD COEUR D ALENE ID 83814
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. MARSHALL MANOR LLC DAVID MARSHALL 6925 E MULLAN TRAIL RD COEUR D ALENE ID 83814		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
<input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)	<div style="font-family: cursive; font-size: 1.2em;"> DAVID WAYNE MARSHALL 2021 PENNSYLVANIA AVE <div style="text-align: right;">COEUR D'ALENE ID. 83814</div> </div>					

5. Organized Under the Laws of:

IDAHO
W 90569

6.

Signature: <u>David W. Marshall</u>	Date: <u>8-5-11</u>
Name (type or print): <u>DAVID W. MARSHALL</u>	Title: <u>OWNER</u>

Issued 07/29/2011 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.

Note: To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** **Do not** put "same as last year" or "same as above". **These will not be accepted.**

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.