

No. W 681		Due no later than Dec 31, 2017		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. CAMP-PO L.L.C. PAUL CAMPBELL 297 E DEPOT WESTON ID 83286 USA		PAUL CAMPBELL 297 E DEPOT WESTON ID 83286			
				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	PAUL CAMPBELL	297 E DEPOT	WESTON	ID	USA	83286	
MANAGER	SHELLEY CAMPBELL	297 E DEPOT	WESTON	ID	USA	83286	
5. Organized Under the Laws of: ID W 681		6. Annual Report must be signed.* Signature: Shelley Campbell Name (type or print): Shelley Campbell Date: 11/14/2017 Title: manager					
Processed 11/14/2017		* Electronically provided signatures are accepted as original signatures.					