

No. W 6145	Due no later than May 31, 2013 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. AMERICAN DISABILITIES ACT COMPLIANCE, DESIGN & CONSTRUCTION LLC DAYLE CARLSON 2421 KOMO MAI PEARL CITY HI 96782 USA		RONALD D CARLSON 641 E 800N BOX 128 FIRTH ID 83236			
			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	DAYLE CARLSON	2421 KOMO MAI	PEARL CITY	HI	USA	96782
5. Organized Under the Laws of: HI W 6145		6. Annual Report must be signed.* Signature: Dayle Calson Name (type or print): Dayle Calson Date: 04/04/2013 Title: Manager				
Processed 04/04/2013		* Electronically provided signatures are accepted as original signatures.				