

No. <b>W 167733</b>	<b>Due no later than Jun 30, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		GARY D SHOOK 590 SUN TERRACE DR TWIN FALLS ID 83301-8330			
	CANYONSIDE PROPERTY MANAGEMENT, LLC 800 FALLS AVE 1 TWIN FALLS ID 83301 USA		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	BEVERLY L SHOOK	590 SUN TERRACE DR	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:  <b>ID</b> <b>W 167733</b>	6. Annual Report must be signed.*					
		Signature: Gary D Shook	Date: 04/23/2018			
		Name (type or print): Gary D Shook	Title: Member			
Processed 04/23/2018		* Electronically provided signatures are accepted as original signatures.				