



Idaho Limited Liability Company Annual Report Form For Office Use Only

File online at: sosbiz.idaho.gov
Due no later than: 04/30/2022

Return completed **-FILED-** 30 days to:
Idaho Secretary
Attn: Ann File #: 0004719728
450 North 4th Street
Boise, ID 83720
Date Filed: 4/28/2022 9:58:00 AM
Phone: (208) 334-2300

Annual Report: No filing fee if received by the due date.

SOS Control Number: 102084 Filing Status: Active-Existing
Limited Liability Company (D) Date Formed: 04/02/2004 Formation Locale: ID

Name and Mailing Address: (1) Add or Change Mailing Address:
IDARANCH EQUESTRIAN EVENT CENTER, LLC
7188 BLUFF RD
NEW PLYMOUTH, ID 83655-5013

Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address:
CHARLENE HENDRICKSON
7188 BLUFF RD
NEW PLYMOUTH, ID 83655

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature: _____
If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Ronald D. Hendrickson	7188 Bluff Rd.	New Plymouth Id 83655
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: Charlene Hendrickson (6) Date: 4-25-2022

(7) Type/Print Name: Charlene Hendrickson (8) Title: agent

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0697-3592 04/28/2022 9:58 AM Received by ID Secretary of State Laverence Denney