




No. W 43858 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 01/22/2018 1. Mailing Address: Correct in this box if needed. KEPPS CROSSING LLC KIRT SCHWIEDER 4949 E. IONA ROAD PO BOX 1662 IDAHO ID 83427 TF ID 83403	2. Registered Agent and Office (NOT A P.O. BOX) CRANDALL & OSEEN PA 329 S WOODRUFF AVE IDAHO FALLS ID 83401 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Kirt Schwieder</td> <td>Po box 1662</td> <td>Idaho Falls</td> <td>ID.</td> <td></td> <td>83403</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Kirt Schwieder	Po box 1662	Idaho Falls	ID.		83403	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;">IDAHO W 43858</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: </td> <td style="width: 40%;">Date: 2-21-18</td> </tr> <tr> <td>Name (type or print): Kirt Schwieder</td> <td>Title: Manager</td> </tr> </table>		Signature: 	Date: 2-21-18	Name (type or print): Kirt Schwieder	Title: Manager																															
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM