

No. W 57823	Due no later than Jan 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PINT SIZE PONDEROSA LLC CAROL L DAVIS 1384 BATTLE RIDGE RD KOOSKIA ID 83539		CAROL L DAVIS 1384 BATTLE RIDGE KOOSKIA ID 83539 <i>Nez perce</i>			
			3. <u>New</u> Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Carol Davis	1384 Battle Ridge Rd Kooskia Id. Id. 83539				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Dick W Pfefferkorn	393 Rader Ridge Rd Lam.ah Id. Id. 83536				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Frank J Pfefferkorn	2078 Sage Grouse Lane Lewiston Id. 83501				
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of:		6.				
IDAHO W 57823	<p>Signature: <u>Carol Davis</u></p> <p>Name (type or print): <u>Carol L Davis</u></p>					Date: <u>11-28-2015</u>
						Title: <u>Manager</u>
Issued 11/24/2015 by TLB						
120886						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM