

No.

## Annual Report Form

Due No Later Than November 30,

2. Registered Agent and Office NOT A P.O. BOX

## Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

NO FEE REQUIRED

\* FIRST NOTICE \*

## 1. Mailing Address - Please Correct, If Not Correct

CLOTHESLINE CLEANERS, L.L.C.

GARY MCCracken

244 SO. ORCHARD

BOISE

ID 83705

GARY MCCracken

244 SO. ORCHARD

BOISE

ID 83705

## 3. Organized Under the Laws of:

ID

W

688

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**  
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one)

Office heldNameStreet or P.O. AddressCityStateZip

PARTNER

GARY MCCracken

SAME AS ABOVE

## 5. SIGNATURE OF CURRENT RA

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Date

8/29/96

Name  
(Typed or Printed)

Title

GARY MCCracken

OWNER

ISSUED: 37-38-1996

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