


No. W 8920	Annual Report Form 1999 <i>Due No Later Than November 30.</i>		2. Registered Agent and Office NOT A P.O. BOX CARL RIPPE PO BOX 1 HAMMETT ID 83627																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 89720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct CONTRACT LANDSCAPE LLC CARL RIPPE PO BOX 1 HAMMETT ID 83627 0001		3. Organized Under the Laws of: ID W 8920																			
	4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																					
<table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Carl Rippe</td> <td>HC63 Box 37A</td> <td>Hammett</td> <td>ID</td> <td>83627</td> </tr> <tr> <td>Manager</td> <td>Elizabeth Rippe</td> <td>HC63 Box 37A</td> <td>Hammett</td> <td>ID</td> <td>83627</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Carl Rippe	HC63 Box 37A	Hammett	ID	83627	Manager	Elizabeth Rippe	HC63 Box 37A	Hammett	ID	83627
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Manager	Elizabeth Rippe	HC63 Box 37A	Hammett	ID	83627																	
5. Signature of New Registered Agent		6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> Signature  Name (Typed or Printed) <u>Elizabeth S. Rippe</u> </div> <div style="width: 35%;"> Date <u>8-21-99</u> Title <u>Manager</u> </div> </div>																				

ISSUED: 07-03-1999

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