

No. W 2279 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 07/12/2011 1. Mailing Address: Correct in this box if needed. CHANDLEE BUILDING, L.L.C. JOHN CHARLES HEPWORTH 537 W BANNOCK BOISE ID 83701	2. Registered Agent and Office (NOT A P.O. BOX) JOHN CHARLES HEPWORTH 537 W BANNOCK BOISE ID 83701 3. <u>New</u> Registered Agent Signature.																																										
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions.																																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">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: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>John Charles Hepworth</td> <td>250 S. 5th Street, 2nd Floor</td> <td>Boise</td> <td>ID</td> <td>US</td> <td>83702</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Jeffrey James Hepworth</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Mike Keller</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Cindy Thornton</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Kathleen Keller</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 type="checkbox"/>	John Charles Hepworth	250 S. 5th Street, 2nd Floor	Boise	ID	US	83702	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jeffrey James Hepworth	"	"	"	"	"	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Mike Keller	"	"	"	"	"	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Cindy Thornton	"	"	"	"	"	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Kathleen Keller	"	"	"	"	"
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	John Charles Hepworth	250 S. 5th Street, 2nd Floor	Boise	ID	US	83702																																						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jeffrey James Hepworth	"	"	"	"	"																																						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Mike Keller	"	"	"	"	"																																						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Cindy Thornton	"	"	"	"	"																																						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Kathleen Keller	"	"	"	"	"																																						
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 2279</div>	6. Signature: <u>Michael T. Keller</u> Name (type or print): <u>Michael T. Keller</u> Date: <u>4-2-13</u> Title: <u>member</u>																																											

Issued 04/01/2013 by PEH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM