| No. W 124170 | Due no later than Apr 30, 2015 | 2. Registered Agent and Address (NO PO BOX) |
|---|--|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | Annual Report Form 1. Mailing Address: Correct in this box if need SUMMIT FIREARMS ACADEMY LLC ROBERT M. KRONE 201 N KINGS RD #101 NAMPA ID 83687 | ROBERT KRONE 905 W HOMEDALE RD CALDWELL 83607 3. New Registered Agent Signature:* |
| NO FILING FEE IF RECEIVED BY DUE DATE | | |
| 4. Limited Liability Companies: Enter Na | mes and Addresses of at least one Member or Manager. | • |
| Office Held Name | Street or PO Address | City State Country Postal Code |
| MANAGER MARY EDNA | KRONE 905 W. HOMEDALE RD. | CALDWELL ID USA 83607 |
| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
| ID | Signature: Mary Krone | Date: 02/19/2015 |
| W 124170 | Name (type or print): Mary Krone | Title: Manager |
| Processed 02/19/2015 | * Electronically provided signatures are accepted as ori | iginal signatures. |