| Ño. | W | 5373 | | Annual Rep Due No Later Tha | | 1999 | 2. Registered Agent a | | |
|---|---------|---|----------------|--------------------------------|-----------------------|---------------------------------|------------------------|--------------|------------|
| Return t | | STATE | | | rect, If Not Correct | | GAYLE A S 5203 S 11 | | ON |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED | | | _ | SON LEASIE S 11TH E | NG, L.L.C. | | IDAHO FAL | LS I | D 83404 |
| | | | 3203 3 11111 E | | | 3. Organized Under the Laws of: | | | |
| * F | IRST | NOTICE * | IDAHO | FALLS | ID 83404 | ' | ID | W | 5373 |
| | | s: Enter Names and pility Companies: Ent | | | | | (check one) | | |
| Offic | ce held | <u>Name</u> | | Street or ! | P.O. Address | | City | <u>State</u> | <u>Zip</u> |
| Manag | ær | Ted Sorens | on. | 5203 Sou | ith 11th East | | Idaho Falls | ID | 83404 |
| lanage | - | Gayle Sore | nson | 5203 Sou | ith 1 %th East | | Idaho Falls | ID | 83404 |
| · Signa | ature o | f New Registered | Agent | 6. | | 0 | | | |
| | | | | Signature 🚄 | 2 aget | <u>~~~</u> | Date | | 7/12/99 |
| | | | | Name (Typed or Printed) _ | Gayle A. So | rensor | Title Re | gistere | ed Agent |
| | ISSU | ED: 07-03-1 | 999 | 1100 1 100 | | | 1 | 5550 | |
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