| No. **W 16115** | **Due no later than Aug 31, 2014** | 2. Registered Agent and Address **(NO PO BOX)** |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br>**NO FILING FEE IF RECEIVED BY DUE DATE** | **Annual Report Form**<br>**1. Mailing Address: Correct in this box if needed.**<br>ON & ON, ANON., LLC<br>BARBARA J BALSIGER<br>331 POWER LANE<br>ST MARIES ID 83861-5081<br>USA | BARBARA BALSIGER<br>331 POWER LANE<br>ST MARIES ID 83861-5081<br><br>3. New Registered Agent Signature:* |

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
|---|---|---|---|---|---|---|
| MANAGER | BARBARA BALSIGER | 331 POWER LANE | ST MARIES | ID | USA | 83861 |
| MEMBER | HEATHER L BALSIGER | PO BOX 31 | ST MARIES | ID | USA | 83861 |

| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
|---|---|---|
| **ID**<br>**W 16115** | Signature: Barbara J Balsiger | Date: 08/21/2014 |
| | Name (type or print): Barbara J Balsiger | Title: Manager |

Processed 08/21/2014

* Electronically provided signatures are accepted as original signatures.