

No. W 49534		Due no later than Apr 30, 2017		Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. DELUNA TOOTH & TURF LLC KATHY DELUNA BOX 81 MCCALL ID 83638		KATHY DELUNA 77 CHASE DR MCCALL ID 83638		3. <u>New</u> 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	KATHY DELUNA	BOX 81	MCCALL	ID		83638	
5. Organized Under the Laws of: ID W 49534		6. Annual Report must be signed.* Signature: Kathy DeLuna Name (type or print): Kathy DeLuna Date: 02/23/2017 Title: owner/manager					
Processed 02/23/2017		* Electronically provided signatures are accepted as original signatures.					