



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov



Return completed form within 30 days to:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

For Office Use Only

-FILED-

File #: 0005477175

Date Filed: 11/13/2023 1:30:00 PM

Due no later than: 10/31/2023

Annual Report: No filing fee if received by the due date.

SOS Control Number: 526007

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 10/28/2016

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

PREACHER I, LLC (THE)

2090 BENCH VIEW DR

GRACE, ID 83241-5100

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

ERIC L OLSON

505 PERSHING AVE STE 101

POCATELLO, ID 83201

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	James Harold Twiss	Trustee of Twiss Trust	2090 Bench View Dr
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			Grace, Idaho
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			83241
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

James Harold Twiss

(6) Date:

11/11/2023

(7) Type/Print Name:

JAMES HAROLD TWISS

(8) Title:

Member

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0853-1004 11/13/2023 1:30 PM Received by Office of the Idaho Secretary of State