

No. W 145631		Due no later than Dec 31, 2016		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		Annual Report Form		BRIAN CRABTREE 3465 E 4058 N KIMBERLY ID 83341			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		WOODLAND ASSISTED LIVING LLC 3465 E 4058 N KIMBERLY ID 83341					
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	
MEMBER	PAM CRABTREE	3465E 4058N	KIMBERLY	ID	USA	83341	
MEMBER	BRIAN CRABTREE	3465E 4058N	KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 145631		Signature: Brian Crabtree			Date: 10/26/2016		
		Name (type or print): Brian Crabtree			Title: Owner		
Processed 10/26/2016		* Electronically provided signatures are accepted as original signatures.					