No. **W 173867**	**Due no later than Nov 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.** ALBON AND MARY SMITH CABIN PROPERTY, LLC SHIRLEY L SMITH 667 N 3530 E MENAN ID 83434	SHIRLEY LORRAINE SMITH 667 N 3530 E MENAN ID 83434-8343 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	SHIRLEY L SMITH	667 N 3530 E	MENAN	ID	USA	83434

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 173867**	Signature: Shirley L. Smith	Date: 09/19/2017
	Name (type or print): Shirley L. Smith	Title: Managing Partner

Processed 09/19/2017

* Electronically provided signatures are accepted as original signatures.