No. <b>W 45277</b>	Due no later than Dec 31, 2015		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		BRADFORD S EIDAM			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  TREASURE VALLEY WOMENS LACROSSE LEAGUE LLC SAUNDRA T MCDAVID 1297 N. CHAUCER WAY			300 E MALLARD #145 BOISE ID 83706			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			BOISE ID				
	EAGLE ID 83616		3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	ames and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER SAUNDRA	T MCDAVID	1297 N. CHAUCER WAY	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Saundra McDavid	Date: 01/15/2016					
W 45277	Name (type or print): Saundra McDavid		Title: Manager				
Processed 01/15/2016	* Electronically provided signatures are accepted as original signatures.						