

No. W 44370	Reinstatement Annual Report Form ADMIN DISSOLVED 02/05/2009		2. Registered Agent and Office (NOT A P.O. BOX) PATRICIA STILWELL 9881 S LOCKNANE CT NAMPA ID 83686																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. VILLA PROPERTIES LLC 9881 S LOCKNANE CT NAMPA ID 83686		3. <u>New</u> Registered Agent Signature.																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																						
<table border="1"> <thead> <tr> <th>Manager or Member Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td colspan="6">Manager Member (circle one)</td> </tr> <tr> <td>Patricia Stilwell</td> <td>9881 S Locknane Nampa ID</td> <td></td> <td></td> <td></td> <td>83686</td> </tr> </tbody> </table>					Manager or Member Name	Street or PO Address	City	State	Country	Postal Code	Manager Member (circle one)						Patricia Stilwell	9881 S Locknane Nampa ID				83686
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Manager Member (circle one)																						
Patricia Stilwell	9881 S Locknane Nampa ID				83686																	
5. Organized Under the Laws of: IDAHO W 44370		6. Signature: <u>Patricia Stilwell</u> Date: <u>8-24</u> Name (type or print): <u>Patricia Stilwell</u> Title: <u>manager</u>																				
Issued 07/28/2011 by CLH																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** Do not put "same as last year" or "same as above". **These will not be accepted.**

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.