

B0256-6332 06/12/2019 4:24 PM Received by ID Secretary of State Lawrence Denney



## Idaho Limited Liability Company Annual Report Form

File online at: [sos.idaho.gov](http://sos.idaho.gov)

Due no later than: 06/30/2019

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

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

SOS Control Number: 614049

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 06/14/2018

Formation Locale: ID

**Name and Mailing Address:**

HMGF PROPERTIES, LLC

350 FOXGLOVE LANE

KETCHUM, ID 83340

(1) Add or Change Mailing Address:

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

CHARLES R ATKINSON

GIACOBBI SQUARE

KETCHUM, ID 83340

(2) Change RA and/or RO Address:

Registered Agents Inc  
784 S. Clearwater Loop  
STE R  
Post Falls, ID 83854  
Kootenai

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

(3) New Registered Agent (RA) Signature: Bill Havre Bill Havre, Assistant Secretary

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 type="checkbox"/> Mem	Blake Grossman	350 FOXGLOVE LANE	Ketchum, ID 83340
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: AS

(6) Date: 6/12/19

(7) Type/Print Name: Audrey Shepherd

(8) Title: Office manager

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