



## Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 08/31/2018

Reporting Year: 2018

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

If reinstatement is required, the reinstatement fee is \$30.00.

Return completed form within 30 days to:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83702

Phone: (208) 334-2300

**SOS Control Number:** 515473  
**Limited Liability Company (D)**

**Filing Status:** Active-Existing  
**Date Formed:** 08/04/2016

**Formation Locale:** ID

**Name and Mailing Address:**

CORRINE TAFOYA-FISHER EVALUATIONS LLC  
16 12TH AVE SO STE 201  
NAMPA, ID 83651

(1) Add or Change Mailing Address:

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

CORRINE TAFOYA-FISHER  
16 12TH AVE SO STE 201  
NAMPA, ID 83651

(2) Change RA and/or RO Address: Hispanic Culture Center

315 Stampede Dr  
Nampa, Id 83687

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

**(3) New Registered Agent (RA) Signature:**

(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 checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Corrine Tafoya-Fisher	Hispanic Culture Center 315 Stampede Dr	Nampa Id 83687
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature: Corrine Tafoya-Fisher

(6) Date: 11/8/18

(7) Type/Print Name: Corrine Tafoya-Fisher

(8) Title: Owner

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.