

October 18, 1996

Alma L. Turner
Turner Family Investments W1786
PO Box 93
Declo ID 83323

RE: Turner Family Investments W1786

Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please be certain that the name(s) and address(es) and the appropriate box in block 4 are complete. Idaho law requires that at least one (1) manager/member of the limited liability company be listed. Please make the appropriate corrections and resubmit the annual report to this office before December 3, 1996 to avoid cancellation.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries
Corporate Division

Enclosures: cited

1786

1904

2. Registered Agent and Office **NOT A P.O. BOX**

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

TURNER FAMILY INVESTMENTS, L
ALMA L TURNER
PO BOX 93

ALMA L TURNER
790 E 100 S

DECLO ID 83323

3. Organized Under the Laws of:

ID W 1786

DECLO ID 83323

4. **Corporations:** Enter Names and Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held

Name _____

Street or P.O. Address

City

State

Zid

5. SIGNATURE OF CURRENT RA

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature:

Name _____

(Typed or
Printed)

Name (Typed or Printed) ELMA L. TURNER

Title

Title PARTNER

~~ISSUED: 10-05-1996~~

~~456~~