

No. W 4465	Due no later than Aug 31, 2015 Annual Report Form	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. JOHNSON HELICOPTERS, L.L.C. CARL JOHNSON PO BOX 506 HOMEDALE ID 83628	DAN C GROBER 17 E WYOMING AVE HOMEDALE ID 83628-2774			
		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	CARL JOHNSON	PO BOX 506	HOMEDALE	ID	83622
5. Organized Under the Laws of: ID W 4465	6. Annual Report must be signed.* Signature: Carl Johnson Name (type or print): Carl Johnson		Date: 07/07/2015 Title: Manager		
Processed 07/07/2015		* Electronically provided signatures are accepted as original signatures.			