


**FILED EFFECTIVE**

No. <b>W 82692</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/14/2011</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> )																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> GOLD CREEK CONSTRUCTION L.L.C. <del>PO BOX 229</del> <del>BOVILL ID 83806</del> <b>520 Empire lane #3</b> <b>Moscow ID 83843</b>		DUSTAN CHARLES SANDERS <del>441 2ND AVE</del> <del>BOVILL ID 83806</del>																																			
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>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>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Dustan Sanders</td> <td>520 Empire lane #3</td> <td>Moscow</td> <td>ID</td> <td>Idaho</td> <td>83843</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Dustan Sanders	520 Empire lane #3	Moscow	ID	Idaho	83843	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							3. <b>New Registered Agent Signature.</b>	
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5. <b>Organized Under the Laws of:</b>  <b>IDAHO</b> <b>W 82692</b>		6. <b>Signature:</b>  <b>Name (type or print):</b> <b>Dustan Sanders</b>  <b>Date:</b> <b>5/16/2014</b> <b>Title:</b> <b>owner Agent</b>																																				

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**