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|--|--------------------|--|----------------|--|---------|-------------|--|--|--|
| No. W 96490 | | Due no later than Sep 30, 2014 | | 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. D&L RECEIVABLES MANAGEMENT LLC ATTN LLOYD A MASON PO BOX 1315 HAYDEN ID 83835 USA | | LLOYD A MASON 3607 HILLCREST CR COEUR D'ALENE ID 83815 | | | | | |
| | | | | 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 | | | |
| MEMBER | LLOYD A MASON | 7352 N GOVERNMENT WY STE E | DALTON GARDENS | ID | USA | 83815 | | | |
| MEMBER | DEBRA K VAN CLEAVE | 3607 HILLCREST CR | COEUR D'ALENE | ID | USA | 83815 | | | |
| 5. Organized Under the Laws of: ID W 96490 | | 6. Annual Report must be signed.* Signature: Lloyd A Mason Name (type or print): Lloyd A Mason | | | | | | | |
| | | Date: 07/21/2014 Title: Member | | | | | | | |
| Processed 07/21/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | | | |