		ent Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX)		
Return to:	ADMIN D	ADMIN DISSOLVED 12/07/2010		MARK H SWEENEY	
SECRETARY OF STATE	Mailing Address: Correct in this box if needed.  MEP PROPERTIES, LLC  PO BOX 604 LEWISTON ID 83501		1021 7TH AVE LEWISTON ID 83501  3. New Registered Agent Signature.		
450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080					
REINSTATEMENT FEE DUE: \$30.00					
<u></u>	nies: E <del>nter Names an</del>	Addresses of Managers OR Mem	bers.		
Manager/Member Name		Street or PO Address	City State	Country Code	
Mack Sweeney		1021-7 Th AUE	Lewison Is	usa 9350/	
Emily Sd	uiler	1021-7 Th AUE 5876 DIAMENS RE	econt NAMPA	FN US4 \$368	
Paul Su	xency	P.O. Box sec	Leavenworth	WA USA 99	
S. Organized Under the Laws	of: 6.				
IDAHO	Signature:	Auch 5	<u> </u>	Date: A Elizo	
W 87122	Name (type	or print): MARK Sween	1041	Title: Gen Man	
Issued 01/24/2011 by KAH					

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.** 

Block 3: Only a new registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of managers or members of the limited liability company. **Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted.** 

Block 5: May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.