



# Idaho Limited Liability Company Annual Report Form

File online at: [sosbiz.idaho.gov](http://sosbiz.idaho.gov)

Due no later than: 07/31/2020

Return completed form within 30 days to:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 170513

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 07/28/2006

Formation Locale: ID

**Name and Mailing Address:**

DANNY WADE DAVIS TRUCKING, LLC

4548 HIGHWAY 95

NEW MEADOWS, ID 83654-5046

(1) Add or Change Mailing Address:

**Registered Agent (RA) and Registered Office (RO) Address:**

DANNY WADE DAVIS

4548 HIGHWAY 95

NEW MEADOWS, ID 83654 (ADAMS COUNTY)

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

*If a new agent is appointed in item (2) above the new agent must sign here to accept the appointment*

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Danny Wade Davis	4548 Hwy. 95	New Meadows, Id. 83654
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Debra Jo Davis	4548 Hwy. 95	New Meadows, Id. 83654
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

*Danny Wade Davis*

(6) Date:

*6/26/2020*

(7) Type/Print Name:

*Danny Wade Davis*

(8) Title:

*Manager*

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0520-1898 07/13/2020 10:45 AM Received by ID Secretary of State Lawrence Denney