

No. W 13527		Due no later than Nov 30, 2013 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		1. Mailing Address: Correct in this box if needed. CUSTOM MORTGAGE, LLC SARAH B SCHROEDER 6240 LAKE OSPREY DR SARASOTA FL 34240		RANDY SIDDOWAY 1110 N FIVE MILE RD BOISE ID 83713			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name SARAH B. SCHROEDER	Street or PO Address 6240 LAKE OSPREY DRIVE		City SARASOTA	State FL	Country USA	Postal Code 34240
5. Organized Under the Laws of: ID W 13527		6. Annual Report must be signed.* Signature: Sarah B. Schroeder Name (type or print): Sarah B. Schroeder Date: 09/23/2013 Title: Manager					
Processed 09/23/2013 * Electronically provided signatures are accepted as original signatures.							