No. W 54361		Due no later than Sep 30, 2014	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed.	GARY NELSON 5422 NORTH 400 EAST				
		NELSON HOMES NORTH, LLC GARY N. NELSON P.O. BOX 6004 TWIN FALLS ID 83303-6004		HAGERMAN ID 83332 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compa	anies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER GARY N NELS		SON NELSON HOMES LLC P.O. BOX 6004	TWIN FALLS	ID	USA	83303	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Gary N Nelson	Date: 09/02/2014				
W 54361		Name (type or print): Gary N Nelson	Title: Member				
Processed 09/02/2014	* Electronically provided signatures are accepted as original signatures.						