| No. W 457 | | Due no later than Aug 31, 2017 | | | 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 | | | CHRISTOPHER T ABEND 411 WEST COLLINS BLACKFOOT ID 83221 | | | | |
| | | 1. Mailing Address: Correct in this box if needed. GROVELAND REAL ESTATE DEVELOPMENT L.L.C. CHRISTOPHER T ABEND 411 WEST COLLINS BLACKFOOT ID 83221 | | 1 | | | | | |
| | | | | 3 | 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | | |
| 4. Limited Liability Compa | nies: Enter Na | mes and Addresses | of at least one Member or Manager. | | | | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code | |
| MANAGER CHRISTOPHER T MANAGER RANDI PHILLIPS | | | 411 WEST COLLINS 132 N 400 WEST | | BLACKFOOT BLACKFOOT | ID ID | USA USA | 83221 83221 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | | |
| ID W 457 | | Signature: Tracy Ramsdell | | | Date: 06/23/2017 | | | | |
| | | Name (type or print): Tracy Ramsdell | | | Title: Accounting | | | | |
| Processed 06/23/2017 | Processed 06/23/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |