No. W 59590		Due no later than Feb 28, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		BRIAN A I	BRIAN A REYNOLDS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. HEADWATERS APPRAISAL, LLC BRIAN A REYNOLDS 9350 BIENAPFL DR. BOISE ID 83709 USA		9350 BIENAPFL DR. BOISE ID 83709				
				3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held N	Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	BRIAN A REYNOLDS CATHERINE J REYNOLDS		1661 W SHORELINE DR STE 200 5042 UMATILLA AVE.	BOISE BOISE	ID ID	USA USA	83702 83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 59590		Signature: Brian Reynolds			Date: 12/15/2013			
		Name (type or p		Title: Manager				
Processed 12/15/2013 * Electronically provided signatures are accepted as original signatures.								