


No. W 51019	Reinstatement Annual Report Form ADMIN DISSOLVED 08/06/2007		2. Registered Agent and Office (NOT A P.O. BOX) CHESTER LACKEY 5510 NEZ PERCE DR POCATELLO ID 83204														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: <u>Correct in this box if needed.</u> WILLOW CREEK DEVELOPMENT, LLC 5510 NEZ PERCE DR POCATELLO ID 83204		3. New Registered Agent Signature.														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td></td> <td><i>Manager</i></td> <td><i>Chester Lackey</i></td> <td><i>5510 Nez Perce</i></td> <td><i>Pocatello</i></td> <td><i>ID</i></td> <td><i>83204</i></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		<i>Manager</i>	<i>Chester Lackey</i>	<i>5510 Nez Perce</i>	<i>Pocatello</i>	<i>ID</i>	<i>83204</i>
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
	<i>Manager</i>	<i>Chester Lackey</i>	<i>5510 Nez Perce</i>	<i>Pocatello</i>	<i>ID</i>	<i>83204</i>											
5. Organized Under the Laws of: IDAHO W 51019		6. Signature:  Name (type or print): <i>Chester Lackey</i> Date: <i>1/21/08</i> Title: <i>Manager</i>															
Issued 01/22/2008 by NLB																	

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 STATE OF IDAHO

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.