

No. <b>W 96758</b>		<b>Due no later than Sep 30, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		GARY R RHOADS 6476 S MAIN ST STE B BONNERS FERRY ID 83805			
		<b>1. Mailing Address: Correct in this box if needed.</b> LEGENDS OF THE FALL TAXIDERMY, LLC KEVIN WHITMORE PO BOX 688 BONNERS FERRY ID 83805 USA		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SARAH WHITMORE	P.O. BOX 688	BONNER FERRY	ID	USA	83805	
MANAGER	KEVIN WHITMORE	P.O. BOX 688	BONNERS FERRY	ID	USA	83805	
5. Organized Under the Laws of:  <b>ID W 96758</b>		6. Annual Report must be signed.* Signature: Kevin Whitmore Name (type or print): Kevin Whitmore Date: 09/05/2012 Title: Manager					
Processed 09/05/2012		* Electronically provided signatures are accepted as original signatures.					