

No. <b>W 58525</b>		<b>Due no later than Jan 31, 2014</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  WOLVERTON HOMES, LLC JACKIE METZGER PO BOX 5179 TWIN FALLS ID 83303		GARY WOLVERTON JR 1411 FALLS AVE. E. SUITE 1002 TWIN FALLS ID 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name GARY WOLVERTON JR	Street or PO Address PO BOX 5179		City TWIN FALLS	State ID	Country USA	Postal Code 83303
5. Organized Under the Laws of:  <b>ID</b> <b>W 58525</b>		6. Annual Report must be signed.*  Signature: Amanda Martin Name (type or print): Amanda Martin  Date: 01/08/2014 Title: Office Manager					
Processed 01/08/2014 * Electronically provided signatures are accepted as original signatures.							