

No. <b>W 62733</b>	<b>Due no later than May 31, 2015</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> PALISADES RECREATIONAL TOYS LLC STEVEN R PARRY PO BOX 51630 IDAHO FALLS ID 83405	STEVEN R PARRY 490 MEMORIAL DR IDAHO FALLS 83402			
		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
MANAGER	STEVEN R PARRY	490 MEMORIAL DR	IDAHO FALLS	ID	83405
5. Organized Under the Laws of:  <b>ID W 62733</b>	6. Annual Report must be signed.* Signature: Steven R. Parry Name (type or print): Steven R. Parry Date: 03/24/2015 Title: Manager				
Processed 03/24/2015		* Electronically provided signatures are accepted as original signatures.			