No. W 26415		Due no later than Oct 31, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. HOMEMORTGAGE, LLC M ANN FISCHER 550 W SUNNYSIDE STE 11 IDAHO FALLS ID 83402			M ANN FISCHER 3000 WESTERN AVE AMMON ID 83406 3. New Registered Agent Signature:*			
				AMMON ID				
Limited Liability Com	ipanies: Enter Nar	mes and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	M ANN FISO MELISSA A		3000 WESTERN AVE 661 LEONA CIRCLE	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83406 83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ann Fischer			Date: 08/31/2015			
W 26415		Name (type or print): Ann Fischer			Title: Member			
Processed 08/31/2015		* Electronically	provided signatures are accepted as origina	l signatures.				