




No. <b>W 73826</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 07/08/2010</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) <b>GLENN E MOSELL</b> <b>2233 ALDERCREST</b> <b>EAGLE ID 83616</b>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT</b> <b>FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b>  <b>SUNNYSLOPE VENTURE FUND I, LLC</b>  PO BOX <del>2240</del> <b>1694</b> EAGLE ID 83616		3. <u>New</u> Registered Agent Signature.

**4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.**

Manager/Member	Name	Street or PO Address	City	State	Country	Postal Code
Glenn Mosell - Managing Member P.O. Box 1694 Eagle ID US 83616						

5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 73826</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">           Signature:  </td> <td style="width: 30%;">           Date: <b>12/2/10</b> </td> </tr> <tr> <td>           Name (type or print): <b>Glenn Mosell</b> </td> <td>           Title: <b>Manager</b> </td> </tr> </table>	Signature: 	Date: <b>12/2/10</b>	Name (type or print): <b>Glenn Mosell</b>	Title: <b>Manager</b>
Signature: 	Date: <b>12/2/10</b>				
Name (type or print): <b>Glenn Mosell</b>	Title: <b>Manager</b>				

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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 managers or members of the limited liability company. **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.