| No. W 9041 | | Due no later than Jun 30, 2014 | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|---|---|----------------|-------------------|-------------------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form | JANINE L SMITH | | | |
| | | 1. Mailing Address: Correct in this box if needed. FOUR RIVERS LAND, LLC JANINE L SMITH PO BOX 8 | 390 FELTHAM RD WEISER ID 83672 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | WEISER ID 83672-0008 | 3. <u>New</u> Register | rea Agent S | ignature:* | |
| 4. Limited Liability Compan | ies: Enter Nar | nes and Addresses of at least one Member or Manager. | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| MANAGER MANAGER MANAGER | DENNIS UJIT DEBRA UJITY JANINE SMIT | E 1505 NW 2ND AVE | FRUITLAND FRUITLAND WEISER | ID ID ID | USA USA USA | 83619 83619 83672 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| ID | | Signature: Janine L Smith Date: 04/14/2014 | | | | |
| W 9041 | | Name (type or print): Janine L Smith | Title: Manager | | | |
| Processed 04/14/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | |