

No. W 7705		Due no later than Jan 31, 2015		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. AUTUMN COVE MOBILE HOME PARK, LLC DAVID N JOHNSON PO BOX 7 REXBURG ID 83440 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 83705-8344	
				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	DAVID N JOHNSON	288 NEZ PERCE AVE P.O. BOX 7	REXBURG	ID	USA 83440
5. Organized Under the Laws of: ID W 7705		6. Annual Report must be signed.* Signature: David Johnson Name (type or print): David Johnson Date: 11/18/2014 Title: Manager			
Processed 11/18/2014		* Electronically provided signatures are accepted as original signatures.			