

No. <b>W 15597</b>		<b>Due no later than Jun 30, 2016</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  PHARMEASE, LLC REECE CHRISTENSEN 1790 SABIN DR AMMON ID 83406		BALL MANAGEMENT LLC 1740 S YELLOWSTONE Idaho Falls ID 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	REECE CHRISTENSEN	5272 TAPPAN FALLS DR	IDAHO FALLS	ID	83406
5. Organized Under the Laws of:  <b>ID W 15597</b>		6. Annual Report must be signed.* Signature: Andrea Ferguson Name (type or print): Andrea Ferguson Date: 05/19/2016 Title: Exec Assistant			
Processed 05/19/2016		* Electronically provided signatures are accepted as original signatures.			