No. W 77107		Due no later than Aug 31, 2013		2.	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			CHERYL BRUCE				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TWIN FALLS CREATIVE ARTS CENTER LLC CHERYL S BRUCE 1421 N DATE ST JEROME ID 83338		•	1421 N DATE ST JEROME ID 83338 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		USA							
4. Limited Liability Com	panies: Enter Na	mes and Addresses of at	t least one Member or Manager.						
Office Held	Name		Street or PO Address	C	ity	State	Country	Postal Code	
MEMBER LEON C BRUCE		JCE	1421 N DATE ST	JE	EROME	ID	USA	83338	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Cheryl Bruce			Date: 08/10/2013				
W 77107		Name (type or print): Cheryl Bruce			Title: Registered Agent				
Processed 08/10/2013 * Electronically provided signatures are accepted as original signatures.									