

|  |                   |  |           |   |                     |
|--|-------------------|--|-----------|---|---------------------|
| No. <b>W 17125</b>   |                   | <b>Due no later than Nov 30, 2014</b>  |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>    |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>SPRING CREEK HOMES LLC<br>CON L JENSEN<br>4604 BURLEY DR<br>CHUBBUCK ID 83202<br>USA |           | CON L JENSEN<br>11070 DEERRIDGE DR<br>POCATELLO 83202 |                     |
|  |                   |  |           | 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  | CON L JENSEN      | 11070 DEERRIDGE  | POCATELLO | ID  | 83201               |
| MANAGER  | TARI L JENSEN     | 11070 DEERRIDGE  | POCATELLO | ID  | 83201               |
| MANAGER  | NICKELAS J JENSEN | 542 NATHAN PO BOX 2662   | CHUBBUCK  | ID  | 83202               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 17125</b>   |                   | 6. Annual Report must be signed.*<br>Signature: Con L. Jensen<br>Name (type or print): Con L. Jensen<br>Date: 12/10/2014<br>Title: Manager   |           |   |                     |
| Processed 12/10/2014   |                   | * Electronically provided signatures are accepted as original signatures.  |           |   |                     |