

## **Idaho Limited Liability Company Annual Report Form**

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For Office Use Only

## Return completed form within 30 days to: Idaho Secretary of State Attn: Annual Reports

450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

-FILED-

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Annual Report: No filing fee if received by the due date.				Due no later than: 04/30/2023		
SOS Control Number: 346742 Limited Liability Company (D)		Filing Status: Active-E	<del>-</del>	nation Locale: ID		
515 MAPLE ST	RAL MINES LLC.		(1) Add or Chan	ge Mailing Address:		
Registered Ag RICHARD J HA 515 MAPLE ST GRANGEVILLE	- E, ID 83530	Office (RO) Address:		and/or RO Address:	A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1	
(4) Limited Liabili	tered Agent (RA) Signatur ty Companies: Enter names accepted. Changes here wil	If a new agent is appointed and addresses of Managers C	R Members. Do N	ew agent must sign here to accept the OT put 'same as last year' or 'sa ce is needed, please add an at	ame as above'.	
Manager/Member	Manager/Member Name Bus		ess	City, State, Zip		
Mgr   Mem   Mem	Richard I. Has	ener 515 Mag	le St.	Grangeville, I	83530	
(5) Signature:	In I Glaen	er	(6) Date: 3	120/23		
(7) Type/Print Name	Richard I.	Haener	(8) Title:	omber	h.	
Instructions: Leg	ibly complete the form above. S	ign and date this form and return t	o the address provide	d above.	ŀ	