No. **W 96516**	**Due no later than Sep 30, 2013**	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.** ANGLESEY INSURANCE AGENCY, LLC DAVID D ANGLESEY 4922 YELLOWSTONE AVE STE A CHUBBUCK ID 83202	DAVE ANGLESEY 4922 YELLOWSTONE AVE STE A CHUBBUCK ID 83202 3. New 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 D ANGLESEY	4922 YELLOWSTONE AVE STE A	CHUBBUCK	ID	USA	83202

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 96516**	Signature: David D Anglesey	Date: 10/11/2013
	Name (type or print): David D Anglesey	Title: Manager

Processed 10/11/2013

* Electronically provided signatures are accepted as original signatures.