

No. <b>W 77538</b>	Reinstatement Annual Report Form ADMIN DISSOLVED 12/07/2010	2. Registered Agent and Office (NOT A P.O. BOX) S&S LEGAL DOCUMENTS, LLC 3006 GOLDSTONE DR STE 101 MERIDIAN ID 83642 Assured Tax & Bookkeeping Inc. Jennifer Belville				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. TRAIL CREEK MANOR, LLC S&S LAW OFFICE 3006 E GOLDSTONE DR STE 101 MERIDIAN ID 83642 USA 2087 S. Tollgate Way Boise, ID 83709	3. New Registered Agent Signature. 13945 W. Wainwright Dr. Ste 103 Boise, ID 83713 <i>JMB</i>				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.						
Manager/Member	Name	Street or PO Address	City	State	Country	Postal Code
Trista Wolfe - member		2087 S. Tollgate Way	Boise	ID		83709
Robert Wolfe - member		2087 S. Tollgate Way	Boise	ID		83709
5. Organized Under the Laws of:  IDAHO W 77538		6. Signature:  Date: 2/7/2011 Name (type or print): Robert Wolfe Title: member				
Issued 01/18/2011 by SLD						

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.  
**Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a **new** registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of managers or members of the limited liability company. **Note: Do not put "same as last year" or "same as above". These will not be accepted.**

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.