

No. W 67093		Due no later than Sep 30, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TRAIL CREEK CROSSING L.L.C. THOM W GARLOCK 970 W BROADWAY #446 PO BOX 30,000 JACKSON WY 83002		THOMAS GARLOCK 20 CEDRON ROAD VICTOR ID 83455			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name THOMAS GARLOCK	Street or PO Address 970 W BROADWAY #446		City JACKSON	State WY	Country	Postal Code 83001
5. Organized Under the Laws of: ID W 67093		6. Annual Report must be signed.* Signature: Candace N Davis Name (type or print): Candace N Davis Date: 07/29/2015 Title: Bookkeeper					
Processed 07/29/2015 * Electronically provided signatures are accepted as original signatures.							