| No. W 102329 | | Due no later than Apr 30, 2016 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|---|---|------------------------|---|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. PARADISE RIDGE ROAD, LLC RUTH M CHURCH 1050 GENESEE TROY RD | | 1050 GENESI | RUTH CHURCH 1050 GENESEE TROY RD GENESEE ID 83832 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar | | GENESEE ID 83832 mes and Addresses of at least one Member or Manager. | | 3. <u>New</u> Register | 3. New Registered Agent Signature:* | | | |
| Office Held Name | | nes and Address | Street or PO Address | City | State | Country | Postal Code | |
| the court of the c | RUTH M. CHURCH FRANKLIN D CHURCH | | 1050 GENESEE-TROY RD. 1605 PARADISE RIDGE RD | GENESEE MOSCOW | ID ID | USA USA | 83832 83843 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 102329 | | Signature: Jamie Capps | | Date | Date: 03/02/2016 | | | |
| | | Name (type or print): Jamie Capps | | Title | Title: Office Manager | | | |
| Processed 03/02/2016 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |