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| No. W 84056 | | Due no later than May 31, 2015 | | 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. ALPINE MEADOWS ASSISTED LIVING L.L.C. ALPINE MEADOWS ASSISTED LIVING 1695 S. LOCUST GROVE RD. MERIDIAN ID 83642 USA | | S&S LEGAL DOCUMENTS, LLC 3023 E COPPER POINT DR STE 106 MERIDIAN ID 83642 | |
| | | | | 3. <u>New</u> 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 | J. SCOT HALLADAY | 1695 S. LOCUST GROVE RD. | MERIDIAN | ID | USA 83642 |
| 5. Organized Under the Laws of: ID W 84056 | | 6. Annual Report must be signed.* Signature: J. Scot Halladay Name (type or print): J. Scot Halladay Date: 07/14/2015 Title: Manager | | | |
| Processed 07/14/2015 | | * Electronically provided signatures are accepted as original signatures. | | | |