

No. <b>W 80260</b>	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2013		2. Registered Agent and Office (NOT A P.O. BOX) <i>Lydia Ann Durrant</i> <i>7590 S. Ten Mile Rd</i> <i>Meridian ID 83642</i>																																				
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. CANYON BEND, LLC <del>IDAHO ESTATE PLANNING PC</del> <del>839 E WINDING CREEK DR STE 102</del> <del>EAGLE ID 83610</del> <i>7590 S. Ten Mile Rd</i> <i>Meridian ID 83642</i>		3. <u>New</u> Registered Agent Signature. <i>Lydia Ann Durrant</i>																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																							
<table border="0"> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td><i>Lydia Ann Durrant</i></td> <td><i>7590 S. Ten Mile Rd.</i></td> <td><i>Meridian</i></td> <td><i>ID</i></td> <td></td> <td><i>83642</i></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Lydia Ann Durrant</i>	<i>7590 S. Ten Mile Rd.</i>	<i>Meridian</i>	<i>ID</i>		<i>83642</i>	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>										
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 80260</b>	6. Signature: <i>Lydia Ann Durrant</i> Name (type or print): <i>Lydia Ann Durrant</i>			Date: <i>4-14-14</i> Title: <i>Member</i>																																			
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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM