




<b>No. W 141200</b>	<b>Due no later than Aug 31, 2018</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> BONNIE KLOSTER 18039 FISH RD WILDER ID 83676
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> WIDMAR WORD PRESS LLC BONNIE KLOSTER PO BOX 3 WILDER ID 83676		<b>3. <u>New</u> Registered Agent Signature.</b>  

**4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**  

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Bonnie Kloster	P.O. Box 3	Wilder,	ID	USA	83676
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

<b>5. Organized Under the Laws of:</b>  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 141200</b> </div>	<b>6.</b> <table style="width: 100%;"> <tr> <td style="width: 60%;">           Signature:   </td> <td style="width: 40%;">           Date:            8-31-18         </td> </tr> <tr> <td>           Name (type or print):            Bonnie Kloster         </td> <td>           Title:            Manager         </td> </tr> </table>	Signature: 	Date: 8-31-18	Name (type or print): Bonnie Kloster	Title: Manager
Signature: 	Date: 8-31-18				
Name (type or print): Bonnie Kloster	Title: Manager				

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