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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------------------------------------|---------|------------------|--|
| No. <b>W 86669</b>                                                                                                                                     |                    | <b>Due no later than Sep 30, 2015</b>                                                                                                                                        |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>FIDELITY BUILDING, LLC<br>DAVID J ALMQUIST<br>PO BOX 58<br>HAILEY ID 83333 |            | DAVID J ALMQUIST<br>1307 WARMSPRINGS RD<br>KETCHUM ID 83340 |         |                  |  |
|                                                                                                                                                        |                    |                                                                                                                                                                              |            | 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                                                                                                                                                | MICHAEL D ALMQUIST | 5323 THE TOLEDO                                                                                                                                                              | LONG BEACH | CA                                                          | USA     | 90803            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                    | 6. Annual Report must be signed.*                                                                                                                                            |            |                                                             |         |                  |  |
| <b>ID<br/>W 86669</b>                                                                                                                                  |                    | Signature: david j almquist                                                                                                                                                  |            |                                                             |         | Date: 07/30/2015 |  |
|                                                                                                                                                        |                    | Name (type or print): david j almquist                                                                                                                                       |            |                                                             |         | Title: owner     |  |
| Processed 07/30/2015                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                                    |            |                                                             |         |                  |  |