


No. W 78030	Due no later than Sep 30, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JAMES F TOPLIFF 1424 E SHERMAN AVE STE 300 COEUR D'ALENE ID 83814
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. BARTON FAMILY PROPERTY, LLC JAMES F TOPLIFF 818 W RIVERSIDE STE 240 SPOKANE WA 99201-0910 USA		3. <u>Now</u> Registered Agent Signature.
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 Member (circle one)			
Manager	William A. Barton,	1218 Birch Street, Sandpoint, ID	83864
Manager	Lois E. Barton,	1218 Birch Street, Sandpoint, ID	83864
5. Organized Under the Laws of:	6. Signatures: 	Date: 9/18/11	IDAHO W 78030
Name (type or print): WILLIAM A. BARTON	Title: Manager		
Issued 07/19/2011 by KAH		116790	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.