

No. <b>W 417</b>		<b>Due no later than Jul 31, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  INDEPENDENT MORTGAGE LTD. CO. CASEY S KRIVOR PO BOX 905 SANDPOINT ID 83864		CASEY S KRIVOR 313 N SECOND AVE SANDPOINT ID 83864	
				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	CASEY S KRIVOR	PO BOX 905	SANDPOINT	ID	83864
MANAGER	DAN S JACOBSON	PO BOX 905	SANDPOINT	ID	83864
5. Organized Under the Laws of:  <b>ID W 417</b>		6. Annual Report must be signed.* Signature: Casey Krivor Name (type or print): Casey Krivor Date: 06/18/2015 Title: Registered Agent			
Processed 06/18/2015		* Electronically provided signatures are accepted as original signatures.			