

No. <b>W 54749</b>	<b>Due no later than Sep 30, 2015</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b> LOCUST GROVE ENTERPRISES #1, LLC DARLENE M BRAMON 536 W BOGUS VIEW DR EAGLE ID 83616	FRANKLIN L BRAMON 536 W BOGUS VIEW DR EAGLE ID 83616			
		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
MEMBER	FRANKLIN L BRAMON	PO BOX 4029	HAILEY	ID	83333
5. Organized Under the Laws of:  <b>ID W 54749</b>	6. Annual Report must be signed.* Signature: Darlene Bramon Name (type or print): Darlene Bramon		Date: 07/18/2015 Title: owner		
Processed 07/18/2015		* Electronically provided signatures are accepted as original signatures.			