

No. J 20		Due no later than Sep 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. BURKE'S LAND AND LIVESTOCK, LLP BURKE L GODFREY 253 S MAIN ST PO BOX 106 CLARKSTON UT 84305		A BRUCE LARSON 155 SOUTH SECOND AVE POCATELLO ID 83205-6369			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PARTNER	F BURKE GODFREY REVOCABLE TRUST	PO BOX 46	CLARKSTON	UT	USA	84305	
PARTNER	B LAMONT GODFREY FAMILY TRUST	PO BOX 106	CLARKSTON	UT	USA	84305	
5. Organized Under the Laws of: ID J 20		6. Annual Report must be signed.* Signature: Susan Godfrey Name (type or print): Susan Godfrey Date: 09/29/2014 Title: Secretary					
Processed 09/29/2014		* Electronically provided signatures are accepted as original signatures.					