

No. <b>W 24334</b>		<b>Due no later than May 31, 2017</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>1. Mailing Address: Correct in this box if needed.</b>  KINGHORN MASONRY & PRECAST, LLC CLAIR R KINGHORN 388 NORTH 3600 EAST LEWISVILLE ID 83431		CLAIR KINGHORN 388 NORTH 3600 EAST LEWISVILLE ID 83431			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	CLAIR KINGHORN	388 NORTH 3600 EAST	LEWISVILLE	ID	83431		
MEMBER	LEXIE KINGHORN	388 NORTH 3600 EAST	LEWISVILLE	ID	83431		
MEMBER	DANE KINGHORN	388 NORTH 3600 EAST	LEWISVILLE	ID	83431		
5. Organized Under the Laws of:  <b>ID</b> <b>W 24334</b>		6. Annual Report must be signed.*  Signature: Clair Kinghorn Name (type or print): Clair Kinghorn  Date: 04/11/2017 Title: member					
Processed 04/11/2017 * Electronically provided signatures are accepted as original signatures.							