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| No. J 20 | | Due no later than Sep 30, 2013 | | 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: | | 6. Annual Report must be signed.* | | | | | |
| ID J 20 | | Signature: Susan Godfrey Name (type or print): Susan Godfrey | | | Date: 09/30/2013 Title: Secretary | | |
| Processed 09/30/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |