


REINSTATEMENT

No. W 13859	Annual Report Form ADMIN DISSOLVED 03/06/2009		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable FAIRVIEW & LOCUST GROVE WAG MANAGEM ROBERT PHILLIPS 855 BROAD STREET, Suite 300 BOISE, ID 83702		HAWKINS SMITH MANAGEMENT LLC 855 BROAD ST STE 300 INC. BOISE, ID 83702 3. <u>New</u> registered agent signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Gary R. Hawkins</td> <td>855 Broad St., #300</td> <td>Boise</td> <td>ID</td> <td>83702</td> </tr> <tr> <td>Manager</td> <td>Hawkins Smith Management, Inc.</td> <td>"Same"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Gary R. Hawkins	855 Broad St., #300	Boise	ID	83702	Manager	Hawkins Smith Management, Inc.	"Same"	"	"	"
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5. Organized under the laws of: IDAHO W 13859		6. Signature <u></u> Date <u>3/16/09</u> Name (Typed or Printed) <u>Robert Phillips</u> Title <u>President of HSMI</u>																				

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