

<b>No. L 6506</b> Due no later than Jan 31, 2014 <b>Annual Report Form</b>		2. Registered Agent and Office (NOT A P.O. BOX) INCORP SERVICES, INC. 1524 S VISTA AVE STE 12 BOISE ID 83705 USA														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HAZEL FAMILY L.P. HAROLD F HAZEL 13500 GILLETTE RD ALBION NY 14411 USA	3. <u>New</u> Registered Agent Signature.														
4. Limited Partnerships: Enter Names and Business Addresses of general partners.																
<table border="1"> <thead> <tr> <th>General Partners</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td></td> <td>HAROLD F HAZEL</td> <td>13500 Gillette Rd</td> <td>Albion</td> <td>NY</td> <td>USA</td> <td>14411</td> </tr> </tbody> </table>			General Partners	Name	Street or PO Address	City	State	Country	Postal Code		HAROLD F HAZEL	13500 Gillette Rd	Albion	NY	USA	14411
General Partners	Name	Street or PO Address	City	State	Country	Postal Code										
	HAROLD F HAZEL	13500 Gillette Rd	Albion	NY	USA	14411										
5. Organized Under the Laws of:  IDAHO L 6506	6. <table border="1"> <tr> <td>Signature:</td> <td><i>Harold F Hazel</i></td> <td>Date:</td> <td><i>1/30/2014</i></td> </tr> <tr> <td>Name (type or print):</td> <td>HAROLD F HAZEL</td> <td>Title:</td> <td>GENERAL Partner</td> </tr> </table>		Signature:	<i>Harold F Hazel</i>	Date:	<i>1/30/2014</i>	Name (type or print):	HAROLD F HAZEL	Title:	GENERAL Partner						
Signature:	<i>Harold F Hazel</i>	Date:	<i>1/30/2014</i>													
Name (type or print):	HAROLD F HAZEL	Title:	GENERAL Partner													
Issued 01/27/2014 by DK1 <span style="float: right;">109364</span>																

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

**Block 3:** Only a new registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of general partners. Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited partnership. Print or type the name of the signer below the signature.

\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the limited partnership is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited partnership to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? \_\_\_\_\_