No. C 133419		Due no later than Apr 30, 2016	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE	1 Mail	Annual Report Form ing Address: Correct in this box if needed.	1211 1470170	JIM HUTCHENS 1211 MICHIGAN STE B				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LAKEVIE JIM HUT 1211 MIG	W CEMETERY ASSOCIATION, INC.	SANDPOINT	SANDPOINT ID 83864 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names and	Business Address	es of President, Secretary, and Directors. Treas	urer (optional).					
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
DIRECTOR PATSY	OLIN	706 N THIRD	SANDPOINT	ID	USA	83864		
DIRECTOR ERIN R	OOS	814 CEDAR ST.	SANDPOINT	ID	USA	83864		
DIRECTOR JIM HU	TCHENS	1211 MICHIGAN SUITE B	SANDPOINT	ID	USA	83864		
5. Organized Under the Laws of: 6. Annual Re		Report must be signed.*						
ID S		Signature: James Hutchens		Date: 03/03/2016				
C 133419	Name (t	Name (type or print): James Hutchens			Title: Treasurer			
Processed 03/03/2016	* Electronic	cally provided signatures are accepted as origina	Il signatures.					