

No. C 28447	Due no later than Feb 28, 2015 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. LEWISTON PRE-MIX CONCRETE, INC. CHARLES D. LAFRENZ P. O. BOX 646 LEWISTON ID 83501	CHARLES LAFRENZ 1402 SNAKE RIVER AVENUE LEWISTON 83501	
		3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).			
Office Held	Name	Street or PO Address	City State Country Postal Code
SECRETARY	ANITA LAFRENZ	1314 6TH AVE.	LEWISTON ID USA 83501
PRESIDENT	CHARLES LAFRENZ	1436 WALLACE DR.	LEWISTON ID USA 83501
5. Organized Under the Laws of: ID C 28447	6. Annual Report must be signed.* Signature: Charles Lafrenz Name (type or print): Charles Lafrenz		Date: 12/15/2014 Title: President
Processed 12/15/2014		* Electronically provided signatures are accepted as original signatures.	