No. **L 6145**	**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.** KEITH AND MABEL HANSEN FAMILY LLLP KEITH HANSEN 2735 CENTRAL AVE AMMON ID 83406	KEITH M HANSEN 2735 CENTRAL AVE AMMON ID 83406 3. New Registered Agent Signature:*

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	KEITH M HANSEN LIVING TRUST	2735 CENTRAL AVE	AMMON	ID	USA	83406
GENERAL PARTNER	KEITH M HANSEN MARITAL TRUST	2735 CENTRAL AVE	AMMON	ID	USA	83406
GENERAL PARTNER	KEITH M HANSEN FAMILY TRUST	2735 CENTRAL AVE	AMMON	ID	USA	83406

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **L 6145**	Signature: J. Brian Hill	Date: 07/18/2013
	Name (type or print): J. Brian Hill	Title: Cpa

Processed 07/18/2013

* Electronically provided signatures are accepted as original signatures.