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|--|--------------------|---|-------------|---|---------|-------------|--|
| No. L 2440 | | Due no later than Apr 30, 2014 | | 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 | | RALPH M HARTWELL 1084 N SKYLINE DR IDAHO FALLS ID 83402 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| HARTWELL LIMITED PARTNERSHIP (THE) MARY HARTWELL PO BOX 51019 IDAHO FALLS ID 83405-1019 | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| GENERAL PARTNER | MARY LYNN HARTWELL | PO BOX 51019 | IDAHO FALLS | ID | USA | 83405-1019 | |
| 5. Organized Under the Laws of: ID L 2440 | | 6. Annual Report must be signed.* | | | | | |
| | | Signature: Lisa Miller | | Date: 02/27/2014 | | | |
| | | Name (type or print): Lisa Miller | | Title: Accountant | | | |
| Processed 02/27/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |