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|--|-------------------|--|------|--|---------|------------------|--|
| No. W 51933 | | Due no later than Jun 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 | | FRANKLIN G LEE 601 W BANNOCK ST BOISE ID 83702 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | LOUISE HAYHURST FAMILY LLC LOUISE A HAYHURST 810 S TWIN PINE DR PINE ID 83647-5346 USA | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | LOUISE A HAYHURST | 810 S TWIN PINE DR | PINE | ID | USA | 83647 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 51933 | | Signature: Louise A Hayhurst | | | | Date: 04/25/2013 | |
| | | Name (type or print): Louise A Hayhurst | | | | Title: Manager | |
| Processed 04/25/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |