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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------|---------------------|
| No. <b>W 13859</b>                                                                                                                                     |                                        | <b>Due no later than Dec 31, 2016</b>                                                                                                                                                                        |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>                           |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                                        | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>FAIRVIEW & LOCUST GROVE WAG MANAGEMENT LLC<br>ROB DICKINSON<br>855 BROAD STREET STE 300<br>BOISE ID 83702-7153 |       | HAWKINS SMITH MANAGEMENT INC.<br>855 BROAD ST STE 300<br>BOISE ID 83702-7153 |                     |
|                                                                                                                                                        |                                        |                                                                                                                                                                                                              |       | 3. <u>New</u> Registered Agent Signature:*                                   |                     |
| 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                                                                                                                                                | GARY R HAWKINS                         | 855 W BROAD STREET SUITE 300                                                                                                                                                                                 | BOISE | ID                                                                           | 83702               |
| MANAGER                                                                                                                                                | GARY R HAWKINS SMITH<br>MANAGEMENT INC | 855 W BROAD STREET SUITE 300                                                                                                                                                                                 | BOISE | ID                                                                           | 83702               |
| 5. Organized Under the Laws of:                                                                                                                        |                                        | 6. Annual Report must be signed.*                                                                                                                                                                            |       |                                                                              |                     |
| <b>ID<br/>W 13859</b>                                                                                                                                  |                                        | Signature: Rob Dickinson                                                                                                                                                                                     |       | Date: 11/11/2016                                                             |                     |
|                                                                                                                                                        |                                        | Name (type or print): Rob Dickinson                                                                                                                                                                          |       | Title: registered agent                                                      |                     |
| Processed 11/11/2016                                                                                                                                   |                                        | * Electronically provided signatures are accepted as original signatures.                                                                                                                                    |       |                                                                              |                     |