

No. W 56298	Due no later than Nov 30, 2017 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. HCRT, LLC MICHAEL T MONTGOMERY C/O MONTGOMERY O'NEIL & ASSOC 1760 N MITCHELL ST BOISE ID 83704		KENNETH L REAGAN C/O REAGAN PARKS & ASSOC. PA 1101 W RIVER ST., STE 350 BOISE ID 83702			
			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
MEMBER	MICHAEL T MONTGOMERY	C/O MONTGOMERY O'NEIL & ASSOC 1760 N MITCHELL ST	BOISE	ID		83704
5. Organized Under the Laws of: ID W 56298		6. Annual Report must be signed.* Signature: Michael T Montgomery Name (type or print): Michael T Montgomery Date: 11/14/2017 Title: Accountant				
Processed 11/14/2017		* Electronically provided signatures are accepted as original signatures.				