

No. W 115845		Due no later than Jul 31, 2015		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. LUKENS HAZARD ASSOCIATES LLC WILLIAM O. LUKENS 2143 W POLO GREEN AVE POST FALLS ID 83854-9802 USA		WILLIAM O LUKENS 2143 W POLO GREEN AVE POST FALLS ID 83854-9802			
				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	WILLIAM O. LUKENS	2143 W POLO GREEN AVE	POST FALLS	ID	USA	83854-9802	
5. Organized Under the Laws of: ID W 115845		6. Annual Report must be signed.* Signature: William O. Lukens Name (type or print): William O. Lukens Date: 06/05/2015 Title: President					
Processed 06/05/2015		* Electronically provided signatures are accepted as original signatures.					