

No. C 55739		Due no later than May 31, 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. LKL, INC. LOWELL L LYTHE 102 QUAIL CREEK RD JEROME ID 83338		J ROBERT ALEXANDER 126 2ND AVE NORTH TWIN FALLS ID 83301			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KOLEAN LYTHE	102 QUAIL CREEK DRIVE	JEROME	ID	USA	83338	
TREASURER	STEPHANIE L BUTLER	1330 WILMORE	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID C 55739		6. Annual Report must be signed.* Signature: KOLEAN LYTHE Name (type or print): KOLEAN LYTHE					
		Date: 03/20/2017 Title: PRESIDENT					
Processed 03/20/2017 * Electronically provided signatures are accepted as original signatures.							