

No. L 5035		Due no later than Apr 30, 2009 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		1. Mailing Address: Correct in this box if needed. ECK FAMILY LIMITED PARTNERSHIP TIM W ECK 6152 W HALF MOON LANE EAGLE ID 83616		TIMOTHY W ECK 6152 W HALF MOON LANE EAGLE ID 83616			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
GENERAL PARTNER	THE ECK CHILDRENS TRUST B	6152 W HALF MOON LN		EAGLE	ID	USA	83616
GENERAL PARTNER	THE ECK CHILDREN'S TRUST A	6152 W HALF MOON LN		EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID L 5035		6. Annual Report must be signed.* Signature: Tim Eck Name (type or print): Tim Eck Date: 03/03/2009 Title: Owner					
Processed 03/03/2009		* Electronically provided signatures are accepted as original signatures.					