

No. L 4517		Due no later than Oct 31, 2011		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		JOHN A WILLIAMSON 19550 EAT A BITE LN CALDWELL ID 83607			
		1. Mailing Address: Correct in this box if needed. JOHN A. & EVELYN WILLIAMSON FAMILY LIMITED PARTNERSHIP JOHN A WILLIAMSON 19550 EAT A BITE LN CALDWELL ID 83607		3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	JOHN A WILLIAMSON	14252 SUNNYSLOPE RD	CALDWELL	ID	USA	83605	
5. Organized Under the Laws of: ID L 4517		6. Annual Report must be signed.* Signature: Roger L Williamson Name (type or print): Roger L Williamson Date: 08/17/2011 Title: Power of Attorney					
Processed 08/17/2011		* Electronically provided signatures are accepted as original signatures.					