No. L 4900		Due no later than Aug 31, 2012		2. Registered Ag	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. HOLMES FAMILY LIMITED PARTNERSHIP ROSAMOND M HOLMES 8880 E MARINE DR POST FALLS ID 83854 USA			COLLEEN HOLMES 8880 E MARINE DR POST FALLS ID 83854			
				3. <u>New</u> Registered Agent Signature:*				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER GENERAL PARTNER GENERAL PARTNER	THOMAS M HOLMES COLLEEN B HOLMES KELLY A PISTONE		8880 E MARINE DR 8880 MARINE DR 410 GREENSFERRY RD	POST FALLS POST FALLS POST FALLS	ID ID ID	USA USA USA	83854 83854 83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID L 4900		Signature: Colleen B Holmes Date: 0			06/21/2012			
		Name (type o		Title: Owner				
Processed 06/21/2012 * Electronically provided signatures are accepted as original signatures.								