

No. L 529

Due no later than December 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

WORKMAN FAMILY PARTNERSHIP, A LIMIT
799 HANKINS RD
TWIN FALLS, ID 83301WILLIAM J WORKMAN
799 HANKINS RD
TWIN FALLS, ID 83301NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Partnerships: Enter Names and Business Addresses of General Partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Gen. Ptn.	Melva Workman	799 Hankins Rd	Twin Falls	ID	83301

5. Organized Under the Laws of:

IDAHO
L 529

6.

Signature

Bill Workman

Date

12-1-08

Name (Typed or Printed)

Bill Workman

Title

Ltd. Partner