No. L 5963		Du	e no later than Nov 30, 2008	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. HAROLD E. THOMAS FAMILY LIMITED LIABILITY LIMITED HAROLD E THOMAS 806 MILL AVE COEUR D ALENE ID 83814					
		PARTNERSHIP HAROLD E TI 806 MILL AVE COEUR D ALEN	HOMAS	3. <u>New</u> Registered Agent Signature:*			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	HAROLD E	THOMAS	806 MILL AVE	COEUR D ALENE	ID	USA	83814
5. Organized Under the Laws of:		6. Annual Report	t must be signed.*				
ID L 5963		Signature: Harold E. Thomas Date: 09/23/2008					
		Name (type or print): Harold E. Thomas Title: General Partner					
rocessed 09/23/2008 * Electronically provided signatures are accepted as original signatures.							