

No. L 4598		Due no later than Jan 31, 2011 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. JOEVAL FAMILY LIMITED PARTNERSHIP KATHLEEN ADAMS % CT CORPORATION SYSTEM 37 CHELSEA PARK PITTSFORD NY 14534		INCORP SERVICES, INC. 921 S ORCHARD ST STE G BOISE ID 83705 USA				
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*				
Office Held GENERAL PARTNER	Name KATHLEEN R ADAMS	Street or PO Address 2425 CLOVER ST		City ROCHESTER	State NY	Country USA	Postal Code 14618	
5. Organized Under the Laws of: ID L 4598	6. Annual Report must be signed.* Signature: Kathleen Adams Name (type or print): Kathleen Adams		Date: 01/26/2011 Title: General partner					
Processed 01/26/2011		* Electronically provided signatures are accepted as original signatures.						