

No. L 524	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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable W.B. WHITELEY FAMILY LIMITED PARTNE ROBYN W FEHLMAN P O BOX 92 OAKLEY, ID 83346		ROBYN W FEHLMAN 405 N CENTER OAKLEY, ID 83346 3. New Registered Agent Signature												
4. Limited Partnerships: Enter Names and Business Addresses of General Partners. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>General Ptn</td> <td>Robyn W. Fehlman</td> <td>PO BOX 92</td> <td>Oakley</td> <td>ID 83346</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		General Ptn	Robyn W. Fehlman	PO BOX 92	Oakley	ID 83346
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
	General Ptn	Robyn W. Fehlman	PO BOX 92	Oakley	ID 83346										
5. Organized Under the Laws of: IDAHO L 524	6. Signature <u>Robyn W Fehlman</u> Name (Typed or Printed) <u>Robyn W Fehlman</u>			Date <u>11/4/08</u> Title <u>gen. ptnr</u>											

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