


No. L 109	Due no later than Jul 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) GARY L MEIKLE ESQ 1000 RIVERWALK DR STE 200 IDAHO FALLS ID 83405														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. WILLIAM L. JUDY FARMS LOIS J CRITCHFIELD 725 S 200 W OREM UT 84058		3. <u>New</u> Registered Agent Signature.														
4. Limited Partnerships: Enter Names and Business Addresses of general partners.																	
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">General Partners</th> <th style="text-align: left; width: 15%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td></td> <td>Lois Critchfield</td> <td>725 S 200 W</td> <td>OREM</td> <td>UT</td> <td>USA</td> <td>84058</td> </tr> </tbody> </table>				General Partners	Name	Street or PO Address	City	State	Country	Postal Code		Lois Critchfield	725 S 200 W	OREM	UT	USA	84058
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	Lois Critchfield	725 S 200 W	OREM	UT	USA	84058											
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;">IDAHO L 109</div>	6. <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): Lois Critchfield </div> <div style="width: 35%;"> Date: May 20 2013 <hr/> Title: General Partner </div> </div>																
Issued 05/16/2013 by KAH 104514																	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM