No. <b>L 3520</b>			Due no later than Oct 31, 2013	2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF THE PART	INCORP SERVICES, INC.			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ERLE W. JACKSON FAMILY LIMITED PARTNERSHIP ERLE W JACKSON 1120 OAK FOREST DR		921 S ORCHARD ST STE G BOISE ID 83705 USA				
NO FILING FEE IF RECEIVED BY DUE DATE		THE VILLAGE	:S FL 32162	3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	ER ERLE W JACKSON		1120 OAK FOREST DR	THE VILLAGES	FL	USA	32162	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Erle W. Jackson Date: 12/02/2013						
L 3520		Name (type or print): Erle W. Jackson Title: Partner						
Processed 12/02/2013		* Electronically provided signatures are accepted as original signatures.						