

No. <b>J 1918</b>		<b>Due no later than Oct 31, 2018</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		EDWARD MCEACHERN 1205 N 11TH ST BOISE ID 83702			
		<b>1. Mailing Address: Correct in this box if needed.</b> MCEACHERN FAMILY LIMITED LIABILITY PARTNERSHIP (THE) JOHN E MCEACHERN 1205 N 11TH ST BOISE ID 83702		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PARTNER	EDWARD MCEACHERN	1205 N 11TH ST	BOISE	ID	USA	83702	
PARTNER	HARMONY SCHROEDER	1205 N 11TH ST	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID J 1918</b>		Signature: J E McEachern			Date: 08/20/2018		
		Name (type or print): J E McEachern			Title: Partner		
Processed 08/20/2018		* Electronically provided signatures are accepted as original signatures.					