



Idaho Limited Partnership Annual Report Form

File online at: sosbiz.idaho.gov



Return completed form within 30 days to:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

For Office Use Only

-FILED-

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Annual Report: No filing fee if received by the due date.

Due no later than: 10/31/2024

SOS Control Number: 18710

Filing Status: Active-Current

Limited Partnership (D)

Date Formed: 10/12/1995

Formation Locale: ID

Name and Mailing Address:

BOYD W. POOLE FAMILY LIMITED PARTNERSHIP (THE)

204 HARTERT DR

IDAHO FALLS, ID 83404-7133

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:

BOYD W. POOLE

204 HARTERT DR

IDAHO FALLS, ID 83404

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in Item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Partnership: Enter names and addresses of General Partners. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Name	Business Address	City, State, Zip
Boyd W Poole	204 HARTERT DR	Idaho FALLS Id 83404
KAREN POOLE	204 HARTERT DR	Idaho FALLS Id 83404

(5) Signature:

Boyd W Poole

(6) Date:

10-10-2024

(7) Type/Print Name:

Boyd W Poole

(8) Title:

General Partner

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

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