No. L 5159	Due no later than February 28, 2009	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	Annual Report Form 1. Mailing Address - Correct in this box, if applicable K & S ANDREWS FAMILY LIMITED PARTNE 674 E 1550 N SHELLEY, ID 83274	CHARLES KEVIN ANDREWS 674 E 1550 N SHELLEY, ID 83274 3. New Registered Agent Signature
RECEIVED BY DUE DATE		
4. Limited Partnerships: Enter Names and Business Addresses of General Partners.		
Office held Name	Street or P.O. Address City	State Zlp
SHOWER IN THE	in Andrews 674E 1550 N Shelle	u, ID 83274
		Ye dik
5. Organized Under the Laws of:	6.	
IDAHO	Signature	Date 12-12-08
L 5159	Name (Typed or Kauin Andrea	N Title Comma L Parties
Issued 12/01/2008	Do Not Tape or Staple	200902004791

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