

No. <b>L 529</b>		<b>Due no later than Dec 31, 2012</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  WORKMAN FAMILY PARTNERSHIP, A LIMITED PARTNERSHIP BILL WORKMAN 799 HANKINS RD TWIN FALLS ID 83301 USA		WILLIAM J WORKMAN 799 HANKINS RD TWIN FALLS ID 83301				
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*				
Office Held GENERAL PARTNER	Name MELVA WORKMAN	Street or PO Address 799 HANKINS RD.		City TWIN FALLS	State ID	Country USA	Postal Code 83301	
5. Organized Under the Laws of:  <b>ID</b> <b>L 529</b>	6. Annual Report must be signed.*  Signature: Bill Workman Name (type or print): Bill Workman		Date: 01/09/2013 Title: Partner					
Processed 01/09/2013		* Electronically provided signatures are accepted as original signatures.						