

No. L 4185		Due no later than Oct 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ROBERT KEEGAN FAMILY LIMITED PARTNERSHIP ROBERT KEEGAN 893 SUNWAY N TWIN FALLS ID 83301		ROBERT KEEGAN 893 SUNWAY N TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
GENERAL PARTNER	ROBERT KEEGAN	893 SUNWAY N		TWIN FALLS	ID	USA	83301
GENERAL PARTNER	JANET KEEGAN	893 SUNWAY N		TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID L 4185		6. Annual Report must be signed.* Signature: Robert Keegan Name (type or print): Robert Keegan Date: 08/18/2014 Title: Partner					
Processed 08/18/2014		* Electronically provided signatures are accepted as original signatures.					