2. Registered Agent and Office NO PO BOX Due no later than November 30, 2006 L 4217 No. **Annual Report Form** KOWALLIS 1. Mailing Address - Correct In this box, if applicable 241 ODLE 1000 W. AMITY BO Return to: SECRETARY OF STATE BOISE, ID 83705 KOWALLIS LIMITED PARTNERSHIP (THE) 700 WEST JEFFERSON THESE 1000 W. AMITY RO. PO BOX 83720 **BOISE. ID 83705** BOISE, ID 83720-0080 3. New Registered Agent Signature NO FILING FEE IF RECEIVED BY DUE DATE Limited Partnerships: Enter Names and Business Addresses of General Partners. State Street or P.O. Address Office held Name CLYPE A. KOWALLIS BOX 8772 INCLINE VILL. Signature Cycle O. Kanalle. Date 9/15/06

Name Printed or CLYOF A. KOWALLIS Title MAG PARTNER 5. Organized Under the Laws of: **IDAHO** L 4217 200611002818 Do Not Tape or Staple Issued 09/01/2006