



Idaho Limited Partnership Annual Report Form

File online at: sos.idaho.gov

Due no later than: 12/31/2019

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

Annual Report: No filing fee if received by the due date.			Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 25607	Filing Status: Active-Cu	rrent		
Limited Partnership (D)	Date Formed: 12/30/199	99 Forr	nation Locale: ID	
Name and Mailing Address: LUCICH FAMILY LIMITED PARTNERS	HIP	(1) Add or Char	ge Mailing Address:	ſ
GARY LUCICH		_	Cara 1 0 1 5-12 Par	(
11334 W MEADOWRIVER DR		610 6.	GREEN CREEK ROAD ID 83647-5379)
STAR, ID 83669-5648		PING,	113 83647-5379	:
Registered Agent (RA) and Registere MARCAE LUCICH GARY LUCICH	d Office (RO) Address:		and/or RO Address:	
		1010 E.	GREEN CREEK ROAL)
11334 W MEADOWRIVER DR . STAR, ID 83669	•	PINE,	CREEN CREEK ROAD ID 83647-5319	•
Note: The Regis	stered Office address must be a ph	ysical Idaho addres	s (no postal box).	
(3) New Registered Agent (RA) Signa				
	If a new agent is appointed in	item (2) above, the n	ew agent must sign here to accept the appo	ointment.
(4) Limited Partnership: Enter names and a not be accepted. Changes here will not affe	ddresses of General Partners. De ct the entity mailing address. If m	o NOT put 'same nore space is need	as last year' or 'same as above'. T led, please add an attachment.	hese will ¹
Name	Business Address		City, State, Zip	
MARCAE LUCICH	410 E. GREEN C	REEK RD.	PINE ID 83647-	5379
MARCAE LUCICH	610 E. GREEN	REEKRO	PINE, ID 83647	-5379
(D)				
(5) Signature:	and the second s		4-2020	
(7) Type/Print Name: GARY LUCICH		(8) Title: <i>GÉ</i>	ENERAL PARTNER	