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| No. L 3498 | | Due no later than Sep 30, 2014 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form | | DOROTHY P SATCHWELL 8294 N IDAHO RD POST FALLS ID 83854 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | DONALD AND DOROTHY SATCHWELL FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP DOROTHY P SATCHWELL 8294 N. IDAHO ROAD POST FALLS ID 83854 | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| GENERAL PARTNER | DONALD AND DOROTHY SATCHWELL FAMILY TRUST | 8294 N. IDAHO ROAD | POST FALLS | ID | USA | 83854 | |
| 5. Organized Under the Laws of: ID L 3498 | | 6. Annual Report must be signed.* Signature: Dorothy Satchwell Name (type or print): Dorothy Satchwell | | Date: 07/16/2014 Title: Trustee | | | |
| Processed 07/16/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |