No. <b>L 2720</b>		Due no later than Mar 31, 2011			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MADSON FAMILY LIMITED PARTNERSHIP (THE) ERVIN E MADSON P O BOX 719  2. New Posistand Apart Signature **						
NO FILING FEE IF RECEIVED BY DUE DATE		BONNERS FERRY ID 83805-0719 3. New Reg USA		3. <u>New</u> Registered	gistered Agent Signature:*			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER GENERAL PARTNER	ERVIN E MADSON CAROLEE M MADSON		P O BOX 719 P O BOX 719	BONNERS FERRY BONNERS FERRY	ID ID	USA USA	83805 83805	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ıd.		Signature: Car	Date:	Date: 01/25/2011				
L 2720		Name (type or print): Carolee Madson		Title:	Title: General Partner			
rocessed 01/25/2011 * Electronically provided signatures are accepted as original signatures.								