No. J 1023		Due no later than Jul 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. CHAPMAN FAMILY LIMITED PARTNERSHIP #3, LLP FRANK D CHAPMAN 2000 E DWORSHAK DR MERIDIAN ID 83642		, 2 N	FRANK D CHIPMAN 2000 E DWARCHAK DR MERIDIAN ID 83642 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Limited Liability Partners	ships: Enter N	ames and Busine	ess Addresses of two (2) or more partners.						
Office Held	Name		Street or PO Address	Cit	ty	State	Country	Postal Code	
PARTNER FRANK D CHAPM PARTNER VELMA J CHAPM			2000 E DWORSHAK DR 2000 E DWORSHAK DR		ERIDIAN ERIDIAN	ID ID	USA USA	83642 83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID J 1023		Signature: Frank D Chapman Name (type or print): Frank D Chapman			Date: 05/23/2011 Title: General Partner				
Processed 05/23/2011	* Electronically provided signatures are accepted as original signatures.								