

No. L 4334		Due no later than Feb 28, 2017		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		GARRY KILLPACK 1140 N 1290 E SHELLEY ID 83274			
		1. Mailing Address: Correct in this box if needed. GARRY & DIANE KILLPACK FAMILY LIMITED PARTNERSHIP (THE) GARRY KILLPACK 1140 N 1290 E SHELLEY ID 83274		3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	GARRY KILLPACK	1140 N 1290 E	SHELLEY	ID	USA	83274	
5. Organized Under the Laws of: ID L 4334		6. Annual Report must be signed.* Signature: GARRY KILLPACK Name (type or print): GARRY KILLPACK Date: 12/29/2016 Title: PRESIDENT					
Processed 12/29/2016		* Electronically provided signatures are accepted as original signatures.					