

No. L 7338		Due no later than May 31, 2018		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 1. Mailing Address: Correct in this box if needed. BRYCE KEVIN ANDREWS FAMILY LIMITED PARTNERSHIP BRYCE KEVIN ANDREWS PO BOX 192 IONA ID 83427		BRYCE KEVIN ANDREWS 5122 E OWENS AVE IONA ID 83427-8342		
				3. <u>New</u> Registered Agent Signature:*		
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	BRYCE KEVIN ANDREWS	PO BOX 192	IONA	ID		83427
GENERAL PARTNER	CHARLES KEVIN ANDREWS	674 E 1550 N	SHELLEY	ID		83274
5. Organized Under the Laws of: ID L 7338		6. Annual Report must be signed.* Signature: Bryce Andrews Name (type or print): Bryce Andrews Date: 05/15/2018 Title: President				
Processed 05/15/2018		* Electronically provided signatures are accepted as original signatures.				