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|--|-------------------|--|---------|--|---------|-------------|--|
| No. L 3287 | | Due no later than Dec 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 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form | | EVELYN OLSON 360 TYLER RD PLUMMER ID 83851 | | | |
| | | 1. Mailing Address: Correct in this box if needed. WH & ME OLSON FAMILY FARM LIMITED PARTNERSHIP EVELYN OLSON 360 TYLER RD PLUMMER ID 83851 | | 3. <u>New</u> Registered Agent Signature: * | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| GENERAL PARTNER | MARY EVELYN OLSON | RR 1 BOX 63 | PLUMMER | ID | USA | 83851 | |
| 5. Organized Under the Laws of: RI L 3287 | | 6. Annual Report must be signed.* Signature: Evelyn Olson Name (type or print): Evelyn Olson Date: 12/27/2011 Title: General Partner | | | | | |
| Processed 12/27/2011 | | * Electronically provided signatures are accepted as original signatures. | | | | | |