

No. L 5161		Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CHARLES KEVIN ANDREWS FAMILY LIMITED PARTNERSHIP C. KEVIN ANDREWS 674 E 1550 N SHELLEY ID 83274-5034 USA		CHARLES KEVIN ANDREWS 674 E 1550 N SHELLEY ID 83274-5034				
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*				
Office Held GENERAL PARTNER	Name CHARLES KEVIN ANDREWS	Street or PO Address 674 E 1550 N		City SHELLEY	State ID	Country USA	Postal Code 83274	
5. Organized Under the Laws of: ID L 5161	6. Annual Report must be signed.* Signature: C Kevin Andrews Name (type or print): C Kevin Andrews		Date: 01/21/2014 Title: General Partner					
Processed 01/21/2014		* Electronically provided signatures are accepted as original signatures.						