

Idaho Limited Partnership Annual Report Form

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For Office Use Only

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Due no later than: 03/31/2024

Return completed form within 30 days to: Idaho Secretary of State

Annual Report: No filing fee if received by the due date.

Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

	Andrew Control of the		
SOS Control Number: 22646 Limited Partnership (D)	Filing Status: Active-Curren	t Formation Locale: ID	202
Littiled Faithership (D)	Date Formed, 03/03/1990	Formation Locale. 1D	
Name and Mailing Address:		(1) Add or Change Mailing Address:	<u> </u>
SFT LIMITED PARTNERSHIP 26522 STAFFORD RD			ப
			<u> </u>
CALDWELL, ID 83607-8739			РM
			70
Registered Agent (RA) and Registered Office (RO) Address: M.C. STANLEY		(2) Change RA and/or RO Address:	če ce j
26522 STAFFORD RD			2
CALDWELL, ID 83607 (CANYON CC	PUNIY)		e d
Note: The Re	pistered Office address must be a physica	il Idaho address (no postal box).	ን ሳ

(4) Limited Partnership: Enter names and addresses of General Partners. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Name	Business Address	City, State, Zip
M.C. STANIBY	26522 STAFFERD RD	City, State, Zip Cal Owfil 10 83607 H
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		0
		<u> </u>
		

(5) Signature: M. C. Stry

(6) Date: 4-10-2024

(7) Type/Print Name: M と STANLE)

(3) New Registered Agent (RA) Signature:

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.