

No. L 6646		Due no later than Feb 28, 2015		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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. PATRICIA M. SMITH FAMILY LIMITED PARTNERSHIP (THE) PO BOX 7156 BOISE ID 83707		JEFFREY L. SMITH 1087 W RIVER ST STE 200 BOISE 83702				3. <u>New</u> Registered Agent Signature: *	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code			
GENERAL PARTNER	SMITH FAMILY EXEMPTION TRUST	1087 W RIVER ST STE 200	BOISE	ID	USA	83702			
5. Organized Under the Laws of: ID L 6646		6. Annual Report must be signed.* Signature: Jeffrey L. Smith Name (type or print): Jeffrey L. Smith							
Processed 02/04/2015		Date: 02/04/2015 Title: Registered Agent							
* Electronically provided signatures are accepted as original signatures.									