No. <b>J 2335</b>		Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			ANITA THOMAS 1910 Y ST HEYBURN ID 83336			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  THOMAS PARK LIMITED LIABILITY PARTNERSHIP ANITA THOMAS PO BOX 441 HEYBURN ID 83336						
				3. <u>New</u> Registered Agent Signature:*				
				NO FILING FEE IF RECEIVED BY DUE DATE				
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.								
Office Held N	Held Name		Street or PO Address		City	State	Country	Postal Code
PARTNER A	ANITA THOMAS		PO BOX 441		HEYBURN	ID		83336
PARTNER D	DARRELL THOMAS		PO BOX 441		HEYBURN	ID		83336
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID J 2335		Signature: Anita Thomas			Date: 01/05/2017			
		Name (type or print): Anita Thomas			Title: Partner			
Processed 01/05/2017		* Electronically provided signatures are accepted as original signatures.						