

No. L 1849

**Due no later than July 31, 2008  
Annual Report Form**

**2. Registered Agent and Office NO PO BOX**

Return to:  
**SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080**

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

**1. Mailing Address - Correct in this box, if applicable**

**LOWELL DEAN BROWNING ASSOCIATES FOU  
LOWELL DEAN BROWNING ASSOC  
5013 HILLSIDE AVE  
BOISE, ID 83703**

**LOWELL D BROWNING  
5013 HILLSIDE AVE  
BOISE, ID 83703**

**3. New Registered Agent Signature**

**4. Limited Partnerships: Enter Names and Business Addresses of General Partners.**

**Office held**

**Name**

**Street or P.O. Address**

**City**

**State**

**Zip**

**General  
Partner** *Lawrence  
Browning*

**5013 HILLSIDE AVE  
Boise**

**ID**

**83703**

**5. Organized Under the Laws of:**

**IDAHO  
L 1849**

**6.**

**Signature**

**Name  
(Type or  
Printed)**

*Lawrence Browning  
LOWELL D BROWNING*

**Date**

**5-18-06**

**Title**

**GENERAL  
Partner**