



Idaho Limited Partnership Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 12/31/2018

Reporting Year: 2018

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Return completed form within 30 days	stoed A
Idaho Secretary of State Attn: Annual Reports 450 North 4th Street	2
Boise, ID 83702 Phone: (208) 334-2300	
Formation Locale: ID	8/201
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Annual Report: No filing fee if received by due date.	
If reinstatement is required, the reinstatement fee is \$30.00.	

SOS Control Number: 13153 Limited Partnership (D)

Filing Status: Active-Current

Date Formed: 12/31/1991

Formation Locale: ID

Mama		Mailing	Address:
Name	anu	Mailling	Auuress:

SATCHWELL PROPERTIES LIMITED PARTNERSHIP

N 9374 GREENSFERRY RD POST FALLS, ID 83854

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:

M YVONNE SATCHWELL N 9374 GREENSFERRY RD. POST FALLS, ID 83854

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

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

Name	Business Address	City, State, Zip
Wade McLean	9470 N. Greensteiny Rd	POST Falls To 83854 P
Wanda McLean	9470 N. Greensterry Rd	Past Folls_td 83854 0
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5) Signature:	M. Gronne	Saletreed
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(7) Type/Print Name/

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

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Received