

No. L 3124

Due no later than June 30, 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

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

WHALEN FAMILY LIMITED PARTNERSHIP
31612 S HWY 3
ST MARIES, ID 83861PATRICIA GAY WILSON
31612 S HWY 3
ST MARIES, ID 83861NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
GP	PATRICIA GAY WILSON	31612 S HWY 3	ST. MARIES	ID	83861

5. Organized Under the Laws of:

IDAHO
L 3124

6.

Signature

Patricia Gay Wilson

Date

4-10-08

Name (Typed or
Printed)

PATRICIA GAY WILSON

Title

GENERAL PARTN.

Issued 04/01/2008

Do Not Tape or Staple

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