No. <b>L 5159</b>	Due no later than Feb 28, 2017	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address: Correct in this box if needed.  K & S ANDREWS FAMILY LIMITED PARTNERSHIP C KEVIN ANDREWS 674 E 1550 N	674 E 1550 N SHELLEY ID	CHARLES KEVIN ANDREWS 674 E 1550 N SHELLEY ID 83274			
NO FILING FEE IF RECEIVED BY DUE DATE	SHELLEY ID 83274-5034	3. <u>New</u> Registered Agent Signature:*				
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER CHARLES I	KEVIN ANDREWS 674 E 1550 N	SHELLEY	ID	USA	83274	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Kevin Andrews	Date: 12/22/2016				
L 5159	Name (type or print): Kevin Andrews	Title: General Partner				
Processed 12/22/2016	* Electronically provided signatures are accepted as original signatures.					