



Idaho Limited Partnership Annual Report Form

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Prm Seturn completed form within 30 days to Holdaho Secretary of State

Idaho Secretary of State

Due no later than: 12/31/2020			Attn: Annual Reports 450 North 4th Street	
Annual Report: No filing fe	e if received by the due date.		e, ID 83720 e: (208) 334-2300	٥
SOS Control Number: 17203	Filing Status: Active-Curro			N
Limited Partnership (D)	Date Formed: 12/19/1994	Form	ation Locale: ID	
Name and Mailing Address:		(1) Add or Chang	e Mailing Address:	H
BRUNEEL FAMILY LIMITED PARTN 4690 BEACON AVE	ERSHIP			••
EMMETT, ID 83617-9602				2
				2
Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address:				 ኢ 0
MARILYN A BRUNEEL 4690 BEACON AVE				Ö
EMMETT, ID 83617				H
				Ω Δ
Note: The Ro	egistered Office address must be a physi	ical Idaho address	(no postal box).	7
(3) New Registered Agent (RA) Sig	nature: Marieland A	Brien	el .	₹
	If a new agent is appointed in its	em (2) above, the nev	w agent must sign here to acc	ept the appointment.
(4) Limited Partnership: Enter names and not be accepted. Changes here will not a	d addresses of General Partners. Do haffect the entity mailing address. If mor	NOT put 'same a re space is neede	s last year' or 'same as ed, please add an attach	above'. These will ment.
Name	Business Address		City, State, Zip	G
Melanie Harper	~ 1540 Suc Ker (ARd	Homesale	. Ida 8365
Steve Brunee	1 4952 N Gorde	nduly	Fagle, Ila	83616
				O
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		····		<u>a</u>
				0
(5) Signature: Warship (sugget	(6) Date: //	<u>23-20</u>	
(7) Type/Print Name: Manily	Brunee/	(8) Title: Mo	nagen	Partner
Instructions: Legibly complete the form abo	ve. Sign and date this form and return to the	ne address provided	d above.	<u></u>