No. L 2720 Return to:		Due no later than Mar 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. MADSON FAMILY LIMITED PARTNERSHIP (THE) ERVIN E MADSON P O BOX 719 BONNERS FERRY ID 83805-0719			Registered Agent and Address (NO PO BOX) ERVIN E MADSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				329 MADSON RD BONNERS FERRY ID 83805				
				3. New Registered Agent Signature:*				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER GENERAL PARTNER	ERVIN E MADSON CAROLEE M MADSON		P O BOX 719 P O BOX 719	BONNERS FERRY BONNERS FERRY	ID ID	USA USA	83805 83805	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Carol		Date: 03/09/2018				
L 2720		Name (type or p		Title: partner				
Processed 03/09/2018 * Electronically provided signatures are accepted as original signatures.								