No. L 5000		Due no later than Jan 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. L.L. MIKELSON FAMILY LIMITED PARTNERSHIP #1 PATRICIA A MIKELSON PO BOX 99 WILDER ID 83676		2.	2. Registered Agent and Address (NO PO BOX) PATRICIA A MIKELSON 20449 RODEO LN WILDER ID 83676 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
NO FILING FEE IF RECEIVED BY DUE DATE								
Office Held	Name		Street or PO Address	C	City	State	Country	Postal Code
GENERAL PARTNER	PATRICIA A	MIKELSON	PO BOX 99	V	VILDER	ID	USA	83676
5. Organized Under the Laws of:		6. Annual Repor	t must be signed.*					
ID L 5000		Signature: Patricia A Mikelson			Date: 04/19/2010			
		Name (type or print): Patricia A Mikelson Title: Gp						
Processed 04/19/2010 * Electronically provided signatures are accepted as original signatures.								