

No. <b>L 6144</b>		<b>Due no later than Sep 30, 2017</b>		<b>Annual Report Form</b>				2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  PETER TRUST LIMITED PARTNERSHIP TOM THOMAS 2300 W SAHARA AVE STE 530 BOX ONE LAS VEGAS NV 89102		PETER STURDIVANT 200 ASPEN LAKES DR HAILEY ID 83333					
				3. <u>New</u> Registered Agent Signature:*					
Office Held	Name	Street or PO Address		City	State	Country	Postal Code		
GENERAL PARTNER	THOMAS MANAGEMENT LLC	2300 W SAHARA AVE #530		LAS VEGAS	NV	USA	89102		
5. Organized Under the Laws of:  <b>NV L 6144</b>		6. Annual Report must be signed.* Signature: Tom Thomas Name (type or print): Tom Thomas Date: 09/01/2017 Title: Manager							
Processed 09/01/2017		* Electronically provided signatures are accepted as original signatures.							