

No. L 3131	Due no later than 7/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PRESTON & NORMA PARKINSON FAMILY LIMITED PARTNERSHIP (THE) PHILLIP B PARKINSON 420 SHOSHONE AVE REXBURG ID 83440		PHILLIP B PARKINSON 420 SHOSHONE AVE REXBURG ID 83440 3. <u>New</u> Registered Agent Signat																		
4. Limited Partnerships: Enter Names and Addresses of General Partners. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>General Partner</td> <td>Phillip B Parkinson</td> <td>420 Shoshone</td> <td>Rexburg</td> <td>Id</td> <td>83440</td> </tr> <tr> <td>General Partner</td> <td>Dayna A Parkinson</td> <td>420 Shoshone</td> <td>Rexburg</td> <td>Id</td> <td>83440</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Zip	General Partner	Phillip B Parkinson	420 Shoshone	Rexburg	Id	83440	General Partner	Dayna A Parkinson	420 Shoshone	Rexburg	Id	83440
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5. Organized Under the Laws of: ID L 3131	6. Annual Report must be signed. Signature: <u>Phillip B Parkinson</u> Date: <u>5-21-09</u> Name(type or print): <u>Phillip B Parkinson</u> Title: <u>General</u>																				