

No. L 3409	Due no later than April 30, 2009 Annual Report Form	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable COINER FAMILY LIMITED PARTNERSHIP CHARLES H COINER 3879 N 3800 E HANSEN, ID 83334	
NO FILING FEE IF RECEIVED BY DUE DATE	2. Registered Agent and Office NO PO BOX CHARLES H COINER 3879 N 3800 E HANSEN, ID 83334	

4. Limited Partnerships: Enter Names and Business Addresses of General Partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Part	CHARLES H COINER	3879 N 3800 E	HANSEN	Id	83334
	KAREN CLINDESMITH	3879 N 3800 E	HANSEN	Id	83334

5. Organized Under the Laws of:

IDAHO
L 3409

6.
Signature

Name
(Type or
Printed)



Date 2-28-09

Title *Per*