No. <b>L 4250</b>		Due no later than Dec 31, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		to the state of th	BERNARD R BOEHMER MD  1335 ALBION AVE BURLEY ID 83318			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		N - 1780 CH - 75 CH -				
		BERNARD R. BOEHMER AND HILDA BOEHMER L.P. BERNARD R BOEHMER MD 1335 ALBION AVE BURLEY ID 83318						
				3. <u>New</u> Registe	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	BERNARD R	BOEHMER MD	1225 SYLVAN CIRCLE	BURLEY	ID	USA	83318	
GENERAL PARTNER	HILDA BOEH	IMER	1225 SYLVAN CIRCLE	BURLEY	ID	USA	83318	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID L 4250		Signature: Bernard R Boehmer Date: 01/12/2010						
		Name (type or pr		Title: Partner				
Processed 01/12/2010	* Electronically provided signatures are accepted as original signatures.							