| No. L 6094 | | Due no later than May 31, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. COTTONWOOD GROVE LLLP BILL SCHMIDT 4515 HWY 93 MACKAY ID 83251 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|---|---|---------------------------|---|-------------------|-------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | 2105 CORON IDAHO FALLS | GREGORY C CALDER 2105 CORONADO ST IDAHO FALLS ID 83404 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| GENERAL PARTNER GENERAL PARTNER GENERAL PARTNER | BILL SCHMIDT CHRIS M SCHMIDT WILLIAM C SCHMIDT | | 4515 HWY 93 3533 NORTHBRIDGE 3548 E. TRAIL BLUFF LANE | MACKAY BOISE BOISE | ID ID ID | USA USA USA | 83251 83706 83716 | |
| C. Organizad Haday tha L | awa afi | C Annual Deport m | unt ha signed ¥ | | | | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID L 6094 | | Signature: Bill Schmidt | | Date: | Date: 04/05/2011 | | | |
| | | Name (type or print): Bill Schmidt | | Title: General Partner | | | | |
| Processed 04/05/2011 | ed 04/05/2011 * Electronically provided signatures are accepted as original signatures. | | | | | | | |