

No. L 223		Due no later than Dec 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. JOE AND FRANCES MCCANN FAMILY LIMITED PARTNERSHIP MICHAEL J MCCANN 202 26TH AVE LEWISTON ID 83501		MICHAEL J MCCANN 202 26TH AVE LEWISTON ID 83801			
				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	CHESTER P MCCANN	1527 19TH AVE	LEWISTON	ID	USA	83501	
GENERAL PARTNER	MICHAEL J. MCCANN	PO BOX 297 414 SPAULDING	WINCHESTER	ID	USA	83555	
5. Organized Under the Laws of: ID L 223		6. Annual Report must be signed.* Signature: Michael McCann Name (type or print): Michael McCann Date: 11/19/2012 Title: Partner					
Processed 11/19/2012		* Electronically provided signatures are accepted as original signatures.					