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| <b>No. L 3104</b><br><br>Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE<br/>DATE</b> | <b>Due no later than Jun 30, 2014</b><br><b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>RCP FAMILY LIMITED PARTNERSHIP<br>RICHARD EGGLESTON<br>1510 E 4500 N<br>BUHL ID 83316 | <b>2. Registered Agent and Office<br/>(NOT A P.O. BOX)</b><br>CHERYL EGGLESTON<br>1510 E 4500 N<br>BUHL ID 83316<br><br><b>3. New Registered Agent Signature.</b> |
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**4. Limited Partnerships: Enter Names and Business Addresses of general partners.**  

| General Partners | Name              | Street or PO Address | City  | State | Country | Postal Code |
|------------------|-------------------|----------------------|-------|-------|---------|-------------|
|                  | Richard Eggleston | 1510 E 4500 N Buhl   | Idaho | USA   |         | 83316       |
|                  | Cheryl Eggleston  | 1510 E 4500 N Buhl   | Idaho | USA   |         | 83316       |

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| <b>5. Organized Under the Laws of:</b><br><br><div style="text-align: center;">IDAHO<br/>L 3104</div> | <b>6.</b><br><div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>Signature:</b> <br/> <b>Name (type or print):</b> Cheryl Eggleston         </div> <div style="width: 35%;"> <b>Date:</b> 4/23/14<br/><br/> <b>Title:</b> Partner         </div> </div> |
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### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a **new** registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of general partners. **Note: DO NOT** put "same as last year" or "same as above". **These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited partnership. Print or type the name of the signer below the signature.

**\*\* The image of this form will be available on the internet once it has been filed. DO NOT** enter Social Security numbers.

If the limited partnership is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited partnership to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? \_\_\_\_\_

**POSTMARK DATES WILL NOT BE ACCEPTED**