

No. L 3584		Due no later than Dec 31, 2013		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		DAVID C ALLEN 3329 OREGON TRAIL DR KIMBERLY ID 83341		
		1. Mailing Address: Correct in this box if needed. IT'S ONLY MONEY, LIMITED PARTNERSHIP JOHN A COLEMAN PO BOX 1293 TWIN FALLS ID 83303		3. <u>New</u> Registered Agent Signature:*		
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	DAVID C ALLEN	141 MORRISON ST	TWIN FALLS	ID	USA	83301
GENERAL PARTNER	BRENDA KAY ALLEN	3329 OREGON TRAIL DR	KIMBERLY	ID	USA	83341
5. Organized Under the Laws of: ID L 3584		6. Annual Report must be signed.* Signature: John Coleman Name (type or print): John Coleman Date: 10/23/2013 Title: Agent				
Processed 10/23/2013		* Electronically provided signatures are accepted as original signatures.				