

No. J 1023	Due no later than Jul 31, 2012 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. CHAPMAN FAMILY LIMITED PARTNERSHIP #3, LLP FRANK D CHAPMAN 2000 E DWORSHAK DR MERIDIAN ID 83642		FRANK D CHIPMAN 2000 E DWARCHAK DR MERIDIAN ID 83642			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PARTNER	FRANK D CHAPMAN	2000 E DWORSHAK DR	MERIDIAN	ID	USA	83642
PARTNER	VELMA J CHAPMAN	2000 E DWORSHAK DR	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of: ID J 1023	6. Annual Report must be signed.* Signature: Frank D Chapman Name (type or print): Frank D Chapman		Date: 05/13/2012 Title: Partner			
Processed 05/13/2012		* Electronically provided signatures are accepted as original signatures.				