



# Idaho Limited Partnership Annual Report Form

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Return completed form within 30 days to:

Idaho Secretary of State  
Attn: Annual Reports  
450 North 4th Street  
Boise, ID 83720  
Phone: (208) 334-2300

For Office Use Only

**-FILED-**

File #: 0005249374

Date Filed: 5/23/2023 9:43:00 AM

Due no later than: 05/31/2023

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 21407

Filing Status: Active-Current

Limited Partnership (D)

Date Formed: 05/16/1997

Formation Locale: ID

**Name and Mailing Address:**

MCCLELLAN FAMILY LIMITED PARTNERSHIP  
3688 CROSSPORT RD  
BONNERS FERRY, ID 83805-5772

(1) Add or Change Mailing Address:

**Registered Agent (RA) and Registered Office (RO) Address:**

GLEN CLAYTON MCCLELLAN  
3688 CROSSPORT RD  
BONNERS FERRY, ID 83805

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Partnership: Enter names and addresses of General Partners. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Name	Business Address	City, State, Zip
GLEN MCCLELLAN	3688 CROSSPORT RD	BONNERS FERRY, ID 83805
LOUISE MCCLELLAN	3688 CROSSPORT RD	BONNERS FERRY, ID 83805

(5) Signature: Glen McClellan

(6) Date: 4/24/23

(7) Type/Print Name: Glen McClellan

(8) Title: Registered Agent / Partner

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0787-8829 05/23/2023 9:43 AM Received by Office of the Idaho Secretary of State