No. L 5963		Du	e no later than Nov 30, 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 1. Mailing Address: Correct in this box if needed. HAROLD E. THOMAS FAMILY LIMITED LIABILITY LIMITED PARTMERS LIPE HAROLD E THOMAS 806 MILL AVE COEUR D'ALENE ID 83814					
		PARTNERSHIP HAROLD E TI 806 MILL AVE COEUR D ALEI	HOMAS	3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	ı	Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	HAROLD E	THOMAS	806 MILL AVE	COEUR D'ALENE	ID	USA	83814
5. Organized Under the Laws of:		6. Annual Report	t must be signed.*				
ID L 5963		Signature: Harold E. Thomas Date: 11/18/2013					
		Name (type or print): Harold E. Thomas Title: General Partner					
Processed 11/18/2013	* Electronically provided signatures are accepted as original signatures.						