



## Idaho Limited Liability Partnership Annual Report Form

File online at: [sos.idaho.gov](http://sos.idaho.gov)

Due no later than: 01/31/2020

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

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

SOS Control Number: 4690

Filing Status: Active-Existing

Limited Liability Partnership (D)

Date Formed: 01/05/2001

Formation Locale: ID

**Name and Mailing Address:**

MAHER FAMILY PARTNERSHIP, L.L.P.

9316 N PEBBLE FALLS LN

BOISE, ID 83714-1759

(1) Add or Change Mailing Address:

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

ANTHONY A MAHER

9316 N PEBBLE FALLS LN

BOISE, ID 83714-1759

(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 Liability Partnerships: Enter names and addresses of 2 or more 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
ANTHONY A. MAHER	9316 PEBBLE FALLS LANE	BOISE, ID 83714
E. ILENE CANNING	16641 FROST ROAD	CALDWELL, ID 83607

(5) Signature:

*Anthony A. Maher*

(6) Date: DECEMBER 10, 2019

(7) Type/Print Name:

ANTHONY A. MAHER

(8) Title: PARTNER

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

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