

No. L 5878		Due no later than Jun 30, 2016		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. OTTO S. FLORENCE FAMILY LIMITED PARTNERSHIP OTTO S. FLORENCE 375 ASPENWOOD DR TWIN FALLS ID 83301		OTTO S FLORENCE 375 ASPENWOOD DR TWIN FALLS ID 83301			
				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	OTTO S FLORENCE	375 ASPENWOOD DR	TWIN FALLS	ID	USA	83301	
GENERAL PARTNER	MARY ALICE FLORENCE	375 ASPENWOOD DR	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID L 5878		6. Annual Report must be signed.* Signature: Otto Florence Name (type or print): Otto Florence Date: 05/05/2016 Title: General Partner					
Processed 05/05/2016		* Electronically provided signatures are accepted as original signatures.					