

No. L 3541

Due no later than November 30, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

LOUG, LIMITED PARTNERSHIP
~~LOU~~
111 LAKEWOOD AVE
SAGLE, ID 83860

LOU GOODNESS
111 LAKEWOOD AVE
SAGLE, ID 83860

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Partnerships: Enter Names and Business Addresses of General Partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
General Partner	Lou Goodness	111 LAKEWOOD	Sagle	ID	83860

5. Organized Under the Laws of:

IDAHO
L 3541

6.

Signature



Date

9-12-08

Name (Typed or Printed)

Lou Goodness

Title

General Partner