No. L 5160		Due no later than Feb 28, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SUSAN LIDDLE ANDREWS FAMILY LIMITED PARTNERSHIP C KEVIN ANDREWS 674 E 1550 N		CHARLES KEVIN ANDREWS 674 E 1550 N SHELLEY ID 83274			
NO FILING FEE IF RECEIVED BY DUE DATE		SHELLEY ID 83274-5034 3. New Registered A		erea Agent S	.gent Signature:↑		
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	CHARLES KE	EVIN ANDREWS	674 E 1550 N	SHELLEY	ID	USA	83274
5. Organized Under the Laws of:		6. Annual Report m	nust be signed.*				
ID L 5160		Signature: Kevin	Date: 12/22/2016				
		Name (type or p	Title: general Partner				
Processed 12/22/2016		* Electronically provided signatures are accepted as original signatures.					