

No. C 119409	Due no later than May 31, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX JAMES W BROCKMAN 445 IDAHO ST GOODING, ID 83330												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable BROCKMAN DISTRIBUTING, INC. JAMES W BROCKMAN 445 IDAHO ST GOODING, ID 83330	3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.														
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Pres</td> <td style="vertical-align: top;">James W Brockman</td> <td style="vertical-align: top;">445 Idaho ST</td> <td style="vertical-align: top;">Gooding</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83330</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	James W Brockman	445 Idaho ST	Gooding	ID	83330
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Pres	James W Brockman	445 Idaho ST	Gooding	ID	83330									
5. Organized Under the Laws of: IDAHO C 119409	6. Signature * <u>James W. Brockman</u> Date * <u>3-12-04</u> Name (Typed or Printed) * <u>James W. Brockman</u> Title * <u>Pres</u>													