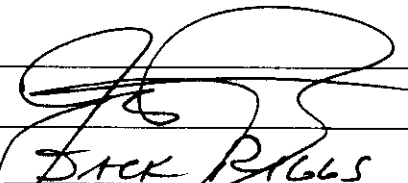


No. W 10188	Due no later than November 30, 2005		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		JACK T RIGGS MD 801 S 11TH COEUR D'ALENE, ID 83814												
	1. Mailing Address - Correct in this box, if applicable JAXWORX, L.L.C. 801 S 11TH COEUR D'ALENE, ID 83814														
4. Limited Liability Companies: Enter Names and Addresses of Members.			3. <u>New</u> Registered Agent Signature												
<table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>JACK RIGGS</td> <td>801 S. 11TH</td> <td>COEUR D'ALENE,</td> <td>ID</td> <td>83814</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>	MANAGER	JACK RIGGS	801 S. 11TH	COEUR D'ALENE,	ID	83814
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MANAGER	JACK RIGGS	801 S. 11TH	COEUR D'ALENE,	ID	83814										
5. Organized Under the Laws of: IDAHO W 10188		6. Signature  Name (Typed or Printed) <u>JACK RIGGS</u> Date <u>11/20/05</u> Title <u>MANAGER/OWNER</u>													

Issued 09/01/2005

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