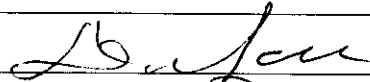
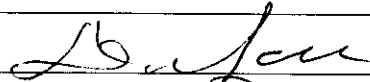
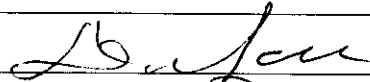


<b>No. W 15888</b>	<b>Due no later than Jul 31, 2002</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>  CHARLES B LEMPESIS 201 W SEVENTH AVE  POST FALLS, ID 83854	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable SANTORINI, LLC  201 W SEVENTH AVE  POST FALLS, ID 83854		3. <u>New</u> Registered Agent Signature	

4. Limited Liability Companies: Enter Names and Addresses of Managers.
 

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager/ Member	CHARLES B. LEMPESIS	201 W. 7th	POST FALLS	ID	83854
Manager/ Member	DONNA SCHAU	LEMPESIS 201 W. 7th	POST FALLS	ID	83854

5. Organized Under the Laws of:  IDAHO W 15888	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Signature </td> <td style="width: 50%;">Date <u>5-13-02</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>Donna Schau</u></td> <td>Title <u>Manager</u></td> </tr> </table>	Signature 	Date <u>5-13-02</u>	Name (Typed or Printed) <u>Donna Schau</u>	Title <u>Manager</u>
Signature 	Date <u>5-13-02</u>				
Name (Typed or Printed) <u>Donna Schau</u>	Title <u>Manager</u>				