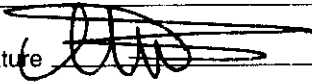


No. W 13884	Due no later than December 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX SHARON L VOLOVSEK 1055 E 1100 N 353 RIVER RUN DR. SHELLEY, ID 83274 CHALLIS, ID 83224																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable GRAMPA'S TRASH SERVICE, L.L.C., AN 1055 E 1100 N - PHYSICAL SHELLEY, ID 83274 MAILING PO BOX 374 SHELLEY, ID 83274		3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers.																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>KEN J. VOLOVSEK</td> <td>353 RIVER RUN DR PO BOX 859</td> <td>CHALLIS</td> <td>ID</td> <td>83224</td> </tr> <tr> <td>MEMBER</td> <td>SHARON L. VOLOVSEK</td> <td>353 RIVER RUN DR PO BOX 859</td> <td>CHALLIS</td> <td>ID</td> <td>83224</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>	MEMBER	KEN J. VOLOVSEK	353 RIVER RUN DR PO BOX 859	CHALLIS	ID	83224	MEMBER	SHARON L. VOLOVSEK	353 RIVER RUN DR PO BOX 859	CHALLIS	ID	83224
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																
MEMBER	KEN J. VOLOVSEK	353 RIVER RUN DR PO BOX 859	CHALLIS	ID	83224																
MEMBER	SHARON L. VOLOVSEK	353 RIVER RUN DR PO BOX 859	CHALLIS	ID	83224																
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 13884</div>		6.  Signature _____ Date <u>10/19/05</u> Name <small>(Typed or Printed)</small> <u>MISTY STEGEMAN</u> Title <u>BOOK KEEPER</u>																			

Issued 10/03/2005

Do Not Tape or Staple

200512000358