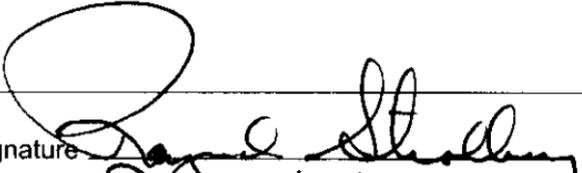


No. C 147085	Due no later than January 31, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable FAITH WALK, INC. 1910 SAN LA RUE TWIN FALLS, ID 83301	RAYMOND STROLBERG 1910 SAN LA RUE TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature																	
NO FILING FEE IF RECEIVED BY DUE DATE																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th data-bbox="325 410 498 430"><u>Office held</u></th> <th data-bbox="498 410 821 430"><u>Name</u></th> <th data-bbox="821 410 1209 430"><u>Street or P.O. Address</u></th> <th data-bbox="1209 410 1489 430"><u>City</u></th> <th data-bbox="1489 410 1662 430"><u>State</u></th> <th data-bbox="1662 410 1867 430"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="325 430 498 503">Pres</td> <td data-bbox="498 430 821 503">Raymond Strolberg</td> <td data-bbox="821 430 1209 503">1910 San La Rue</td> <td data-bbox="1209 430 1489 503">Twin Falls,</td> <td data-bbox="1489 430 1662 503">ID</td> <td data-bbox="1662 430 1867 503">83301</td> </tr> <tr> <td data-bbox="325 503 498 576">Sec.</td> <td data-bbox="498 503 821 576">Sandra Strolberg</td> <td data-bbox="821 503 1209 576">1910 San La Rue</td> <td data-bbox="1209 503 1489 576">Twin Falls,</td> <td data-bbox="1489 503 1662 576">ID</td> <td data-bbox="1662 503 1867 576">83301</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	Raymond Strolberg	1910 San La Rue	Twin Falls,	ID	83301	Sec.	Sandra Strolberg	1910 San La Rue	Twin Falls,	ID	83301
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5. Organized Under the Laws of: IDAHO C 147085	6.  Signature _____ Date <u>11/7/03</u> Name <small>(Typed or Printed)</small> <u>Raymond Strolberg</u> Title <u>Pres</u>																			