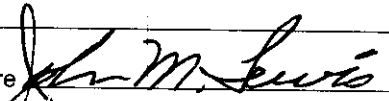


No. W 11435	Due no later than Mar 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		JOHN LEWIS 1502 SHAW MOUNTAIN ROAD BOISE, ID 83712																		
	LOUISIANA PURCHASE LLC 1502 SHAW MOUNTAIN ROAD BOISE, ID 83712 83702		3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <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>KATHLEEN C LEWIS</td> <td>1502 SHAW MTN. RD.</td> <td>BOISE</td> <td>ID</td> <td>83702</td> </tr> <tr> <td>MANAGER</td> <td>JOHN M. LEWIS</td> <td>1502 SHAW MTN. RD.</td> <td>BOISE</td> <td>ID</td> <td>83702</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	KATHLEEN C LEWIS	1502 SHAW MTN. RD.	BOISE	ID	83702	MANAGER	JOHN M. LEWIS	1502 SHAW MTN. RD.	BOISE	ID	83702
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5. Organized Under the Laws of: IDAHO W 11435	6. Signature  Name (Type or Print) <u>JOHN M. LEWIS</u>			Date <u>2/7/01</u> Title <u>XXXX</u>																	