

No. W 5301	Annual Report Form 1999 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX PAMELA K JOHNSON 251 L. HWY 54 ATHOL ID 83841												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct GOOSE, L.L.C. (THE) PAMELA K JOHNSON P O BOX 929 ATHOL ID 83841		3. Organized Under the Laws of: ID W 5301												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)															
<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: 25%;"><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>MANAGER</td> <td>PAMELA K JOHNSON</td> <td>POB 929</td> <td>ATHOL</td> <td>ID</td> <td>83801</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	PAMELA K JOHNSON	POB 929	ATHOL	ID	83801
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER	PAMELA K JOHNSON	POB 929	ATHOL	ID	83801										
5. Signature of New Registered Agent		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Signature</td> <td style="width: 20%;"><i>Pam Johnson</i></td> <td style="width: 20%;">Date</td> <td style="width: 20%;">10-25-99</td> </tr> <tr> <td>Name <small>(Typed or Printed)</small></td> <td>PAM JOHNSON</td> <td>Title</td> <td>Manager</td> </tr> </table>		Signature	<i>Pam Johnson</i>	Date	10-25-99	Name <small>(Typed or Printed)</small>	PAM JOHNSON	Title	Manager				
Signature	<i>Pam Johnson</i>	Date	10-25-99												
Name <small>(Typed or Printed)</small>	PAM JOHNSON	Title	Manager												

ISSUED: 07-03-1999

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