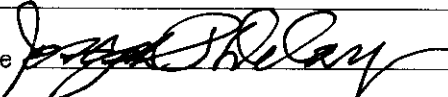


No. W 3022	Due no later than Oct 31, 2000		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		NICK M. LAMANNA, ATTORNEY												
	1. Mailing Address - Correct in this box, if applicable DCS, A LIMITED LIABILITY COMPANY NICK M. LAMANNA, ATTORNEY 9TH & HWY 2 PRIEST RIVER, ID 83856		9TH & HWY 2 PRIEST RIVER, ID 83856												
			3. <u>New</u> 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></td> <td>Manager Joseph P. Delay</td> <td>5426 S. Quail Ridge Cr.,</td> <td>Spokane,</td> <td>WA.</td> <td>99223</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 Joseph P. Delay	5426 S. Quail Ridge Cr.,	Spokane,	WA.	99223
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
	Manager Joseph P. Delay	5426 S. Quail Ridge Cr.,	Spokane,	WA.	99223										
5. Organized Under the Laws of: IDAHO W 3022	6.  Signature _____ Date <u>10/10/00</u> Title: _____ Name <small>(Typed or Printed)</small> <u>Joseph P. Delay</u> XXX <u>Manager</u>														

Issued 08/01/2000

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