No. W 11304	Due no later than Mar 31, 2001	
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	1 Mailing Address - Correct i- 4	NEAL HIKIDA
700 WEST JEFFERSON		349 N 2500 E
PO BOX 83720	I NEAL HIKIDA	
BOISE, ID 83720-0080	349 N 2500 E	ST ANTHONY, ID 83445
NO FILING FEE IF	ST ANTHONY, ID 83445	
	37 ANTHONY, ID 83445	New Registered Agent Signature
RECEIVED BY DUE DATE		o sugnature
 Limited Liability Compan 	ies: Enter Names and Addresses of Managers.	
Office held Name	and Addresses of Managers.	
Office held Name	Street or P.O. Address	
manager West H.K.da	349 N 2500 E ST. Anthony	State Zip Zip Syys
	SI. Anthony	Id. 83445
 Organized Under the Laws of: 	6	
5. Organized Under the Laws of:	6.	
IDAHO	6. Signature Hal Alla	
	6. Signature Hal Alla	Date _0/-2/-6/
IDAHO	6. Signature Tel Winds Name Printed) New / Winds	Date <u>0/-2/-6/</u> Title:
IDAHO	6. Signature Held Alla Name Printed) Name Printed) New / Held	Date <u>0/-2/-6/</u> Title:XXXXX