

No. <b>W 35866</b>	<b>Due no later than January 31, 2006</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>		BRADFORD A WELSER 18634 W QUAIL'S LN POST FALLS, ID 83854  3. <u>New</u> Registered Agent Signature													
	VON WELSER INVESTING, L.L.C. 18634 W QUAIL'S LN POST FALLS, ID 83854															
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th data-bbox="336 401 519 433"><u>Office held</u></th> <th data-bbox="519 401 781 433"><u>Name</u></th> <th data-bbox="781 401 1306 433"><u>Street or P.O. Address</u></th> <th data-bbox="1306 401 1524 433"><u>City</u></th> <th data-bbox="1524 401 1662 433"><u>State</u></th> <th data-bbox="1662 401 1873 433"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="336 433 519 484">Manager</td> <td data-bbox="519 433 781 484">Brad Welser</td> <td data-bbox="781 433 1306 484">18634 W. Quail LN</td> <td data-bbox="1306 433 1524 484">Post Falls</td> <td data-bbox="1524 433 1662 484">ID</td> <td data-bbox="1662 433 1873 484">83854</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	Brad Welser	18634 W. Quail LN	Post Falls	ID	83854
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Brad Welser	18634 W. Quail LN	Post Falls	ID	83854											
5. Organized Under the Laws of:  IDAHO W 35866		6. Signature <u>Brad Welser</u> Date <u>11-16-05</u> Name <small>(Typed or Printed)</small> <u>BRAD WELSER</u> Title <u>Manager</u>														