

No. W 16845	Due no later than October 31, 2004 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 TLB, L.L.C. 2898 EAST 800 NORTH ROBERTS, ID 83444	THOMAS L BUXTON 2898 EAST 800 NORTH ROBERTS, ID 83444 3. <u>New Registered Agent Signature</u>																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;"><u>Office held</u></th> <th style="text-align: center;"><u>Name</u></th> <th style="text-align: center;"><u>Street or P.O. Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">President</td> <td>Thomas L. Buxton</td> <td>2898 E 800N</td> <td>Roberts</td> <td>Id.</td> <td>83444</td> </tr> <tr> <td style="text-align: center;">Secretary</td> <td>Charmel L. Buxton</td> <td>2898 E 800N</td> <td>Roberts</td> <td>Id.</td> <td>83444</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>	President	Thomas L. Buxton	2898 E 800N	Roberts	Id.	83444	Secretary	Charmel L. Buxton	2898 E 800N	Roberts	Id.	83444
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Secretary	Charmel L. Buxton	2898 E 800N	Roberts	Id.	83444															
5. Organized Under the Laws of: IDAHO W 16845	6. Signature <u>Thomas L. Buxton</u> Date <u>8/24/04</u> Name <small>(Type or Print)</small> _____ Title _____																			