	Due no later than November 30, 2003	2. Registered Agent and Office NO PO BOX
No. W 5035	Annual Report Form	ALLEN LEE CENTERS
Return to:	Mailing Address - Correct in this box if applicable	3770 S LINDER
SECRETARY OF STATE	CASCADE APARTMENTS LLC	
700 WEST JEFFERSON	ALLEN LEE CENTERS	MERIDIAN, ID 83642
PO BOX 83720 BOISE, ID 83720-0080	PO BOX 518	
BOISE, ID 63720-0000		3. New Registered Agent Signature
NO FILING FEE IF	MERIDIAN, ID 83680	
DATE		
4. Limited Liability Compa	anies: Enter Names and Addresses of Managers.	
4. Limited Bloomly Comp.	Ci L DO Address Ci	ity <u>State</u> <u>Zip</u>
Office held Name	Street or P.O. Address CENTRES POBINES AREA OFFICIAL STREET	ity <u>State</u> <u>Zip</u> DITAN II) 83680
DORGEN - IT LEE	Dans DO BAX 310 MIER	LULIA FO
PRESIUENI FIL	CEMPA	
		0/10/02
5. Organized Under the Laws of:	6. £000	Date 9/12/03
	Signature	Date 9/12/03
IDAHO	Signature	Date 9/12/03 FRS Title PROSIDENT
IDAHO	Signature Name Printed) Signature (Typed or LEE CENT)	Date 9/12/03 ENS Title Acos dent 673