

No. W 5035	Due no later than November 30, 2003		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		ALLEN LEE CENTERS												
	1. Mailing Address - Correct in this box if applicable CASCADE APARTMENTS LLC ALLEN LEE CENTERS PO BOX 518 MERIDIAN, ID 83680		3770 S LINDER MERIDIAN, ID 83642 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <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>PRESIDENT</td> <td>LEE CENTERS</td> <td>PO BOX 518</td> <td>MERIDIAN</td> <td>ID</td> <td>83680</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	LEE CENTERS	PO BOX 518	MERIDIAN	ID	83680
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
PRESIDENT	LEE CENTERS	PO BOX 518	MERIDIAN	ID	83680										
5. Organized Under the Laws of: IDAHO W 5035	6. Signature <u>Lee</u> Date <u>9/12/03</u> Name (Typed or Printed) <u>LEE CENTERS</u> Title <u>President</u>														