| No. W 8750 | | Due no later than May 31, 2006 2. Registered Agent and Address (NO PO BOX) | | | | | | |
|--|------------------|--|--|-------------------------------------|------------------|---------|-------------|--|
| Return to: | | Annual Report Form | | | MICHAEL E REAGAN | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address HALF ROUND BAY LL LIESCHE, REAGAN, E 1044 NORTHWEST I | 1044 NORHTWEST BLVD STE E LIESCHE, REAGAN, ETAL COEUR D'ALENE ID 83814 | | | | | |
| | | COEUR D'ALENE ID 83814 | | 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compar | nies: Enter Nai | mes and Addresses of a | t least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | MICHAEL E REAGAN | | 1044 NORTHWEST BLVD SUITE D | COEUR D'ALENE | ID | | 83814 | |
| | | | | | | | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| IDAHO | | Signature: MICHAEL E REAGAN | | Date: (| Date: 03/21/2006 | | | |
| W 8750 | | Name (type or print): MICHAEL E REAGAN | | Title: REGISTERED AGENT | | | | |
| Processed 03/21/2006 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |