

No. W 6041	Due no later than April 30, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX NANCY A CRAM 18058 S ROBINSON BLVD MELBA, ID 83641												
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 SCAR, L.L.C. NANCY A CRAM 18058 S ROBINSON BLVD MELBA, ID 83641	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="height: 100px; vertical-align: bottom;">manager</td> <td style="vertical-align: bottom;">Nancy A. Cram</td> <td style="vertical-align: bottom;">18058 S Robinson</td> <td style="vertical-align: bottom;">Melba,</td> <td style="vertical-align: bottom;">ID</td> <td style="vertical-align: bottom;">83641</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	Nancy A. Cram	18058 S Robinson	Melba,	ID	83641
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
manager	Nancy A. Cram	18058 S Robinson	Melba,	ID	83641									
5. Organized Under the Laws of: IDAHO W 6041	6. Signature <u>Nancy A. Cram</u> Date <u>2-6-04</u> Name <small>(Typed or Printed)</small> <u>Nancy A. Cram</u> Title <u>manager</u>													