No. C 126948	Due no later than January 31, 2004 2. Registered Agent and	7 Office AG . C Z z
110.	Annual Report Form PETER S HARVEY	
Return to:	1 Mailing Address Correct in this box if applicable 834 FALLS AVE ST	E 1180
SECRETARY OF STATE	ADULT, CHILD, AND FAMILY ASSOCIATES	
700 WEST JEFFERSON	PETER S HARVEY TWIN FALLS, ID 8	3301
PO BOX 83720	834 FALLS AVE STE 1180	
BOISE, ID 83720-0080	3. New Registered Age	nt Signature
	TWIN FALLS, ID 83301	
NO FILING FEE IF		
RECEIVED BY DUE DATE	- Flynnight Sporetary and Directors	
4. Corporations: Enter Na	ames and Business Addresses of President, Secretary and Directors.	
	Street or PO Address City State	<u>Zip</u>
Office held Name	=2.0 × 1 × 0 × 00	TD \$320
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President, refer Secretary. Mari	yJ. Harvey, 834 Falls Ave., Stell80. Twin Falls,	ID 8330
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Secretary. Mary	yJ. Harvey, 834 Falls Ave., Stell80. Twin Falls,	TD 8330
Secretary. Mary 5. Organized Under the Laws of:		
	6. Signature Page Date 11	
5. Organized Under the Laws of:	6. Signature Page Date 11	
5. Organized Under the Laws of:		ID 8330 26/03 Sidan