

No. 43	Idaho Limited Liability Company Annual Report Form		2. Registered Agent and Office											
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		WILLIAM E WIGHT 397 BLUE LAKES BLVD N TWIN FALLS ID 83301											
	1. Mailing Address — Please Correct, if Not Correct													
	INTEGRATED COMPUTER SERVICES L. WILLIAM E WIGHT 397 BLUE LAKES BLVD N TWIN FALLS ID 83301		3. Organized Under The Laws of ID NO: 43											
4. Names and Addresses of ☒ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>FORNBERG, BOB William E. Wight</td> <td>397 Blue Lakes Blvd. No.</td> <td>Twin Falls</td> <td>ID.</td> <td>83301</td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	FORNBERG, BOB William E. Wight	397 Blue Lakes Blvd. No.	Twin Falls	ID.	83301
Name	Street or P.O. Address	City	State	Zip										
FORNBERG, BOB William E. Wight	397 Blue Lakes Blvd. No.	Twin Falls	ID.	83301										
5. Signature of the Current Registered Agent (If changed in block 2)		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.												
W.E. Wight		Signature: W.E. Wight Name: (Print) Date: 7-7-94												