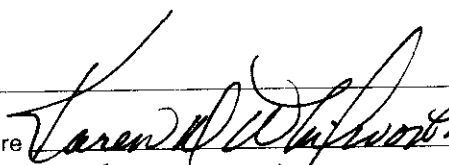


No. <b>W 6259</b>	Due no later than May 31, 2004		2. Registered Agent and Office <b>NO PO BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>		KAREN D WHITWORTH													
	1. Mailing Address - Correct in this box, if applicable <b>SLEEPING BEAR LIMITED LIABILITY COM</b>  PO BOX 770  CHALLIS, ID 83226		630 MAIN ST  CHALLIS, ID 83226  3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers.  <table border="1"> <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>OWNER/ MANAGER</td> <td>KAREN Whitworth</td> <td>630 MAIN</td> <td>CHALLIS</td> <td>ID</td> <td>83226</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>	OWNER/ MANAGER	KAREN Whitworth	630 MAIN	CHALLIS	ID	83226
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
OWNER/ MANAGER	KAREN Whitworth	630 MAIN	CHALLIS	ID	83226											
5. Organized Under the Laws of:  IDAHO W 6259		6. Signature  Date <u>3-8-04</u> Name (Typed or Printed) <u>KAREN Whitworth</u> Title <u>OWNER.</u>														