

No. W 12548	Due no later than July 31, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX												
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 CAROLYN, LLC PO BOX 115 MALTA, ID 83342	CAROLYN HEATON 45 N MAIN MALTA, ID 83342 3. New Registered Agent Signature												
<p>4. Limited Liability Companies: Enter Names and Addresses of Members.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td colspan="4" style="text-align: center; vertical-align: middle;"> <p><i>Carolyn Heaton LLC owner/manager</i> <i>P.O. Box 115 Malta, Id. 83342</i></p> </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>			<p><i>Carolyn Heaton LLC owner/manager</i> <i>P.O. Box 115 Malta, Id. 83342</i></p>			
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		<p><i>Carolyn Heaton LLC owner/manager</i> <i>P.O. Box 115 Malta, Id. 83342</i></p>												
5. Organized Under the Laws of: IDAHO W 12548	<p>6. Signature <i>Carolyn Heaton</i> Date <i>5/11/04</i> <small>(Typed or Printed)</small> Name <i>Carolyn Heaton</i> Title <i>owner</i></p>													