No. <b>W 25838</b>		AND RESERVOIS AND REPORT AND RECEIVED AND AND AND AND AND AND AND AND AND AN		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		TRAVIS BOWEN PC 1906 JENNIE LEE DR IDAHO FALLS ID 83404 0000				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.						
		NEWBERRY BUILDING LLC (THE) MICHAEL JAMES JOHNSTON 160 NORTH MAIN STREET		DAIROTALLS D 65404 0000				
				3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF		POCATELLO ID 83204 0010						
RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Nar	mes and Addresses of at	: least one Member or Manage	er.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	MICHAEL JA	MES JOHNSTON	160 NORTH MAIN STREET	PO BOX 10	POCATELLO	ID		83204
5. Organized Under the Laws of:		6. Annual Report must						
IDA HO W 25838		Signature: Michael James Johnston			Date: 10/11/2005			
		Name (type or print): Michael James Johnston			Title: Manager			
Processed 10/11/2005 * Electronically provided signatures are accepted as original signatures.								