NO. W 3605	Due no later than Feb 28, 2002 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	Annual Report Form 1. Mailing Address - Correct in this box, if applicable TONY'S SUPPER CLUB, L.L.C. NELLA FAE TROY 1411 WALLACE AVE COEUR D'ALENE, ID 83814	NELLA FAE TROY 1411 WALLACE AVE COEUR D'ALENE, ID 83814 3. New Registered Agent Signature
 Limited Liability Compa _Office held Name 	anies: Enter Names and Addresses of Members.	
Member NElla I	Street or P.O. Address F. TROY 1411 WALLACE AVE. C C L. THOMAS 1919 E FAIRWAY I	ity State Zip 83814. Poeur d'Akwe, Id 83814.
Member NElla I	F TROY 1411 WALLACE AVE. C.	ity Coeurd Akne, In 83814 Coeurd, Id. 83815
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