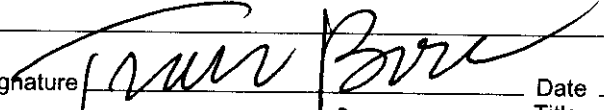


No. W 9397	Due no later than Jul 31, 2001		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		TRAVIS L BOWEN PC												
	1. Mailing Address - Correct in this box, if applicable GOBLE MANAGEMENT, L.L.C. 1906 JENNIE LEE DR IDAHO FALLS, ID 83404		1906 JENNIE LEE DR IDAHO FALLS, ID 83404 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <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>Operating Manager</td> <td>E. Marlowe Goble</td> <td>5 West Blair Road</td> <td>Alta</td> <td>Wyoming</td> <td>83422</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>	Operating Manager	E. Marlowe Goble	5 West Blair Road	Alta	Wyoming	83422
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Operating Manager	E. Marlowe Goble	5 West Blair Road	Alta	Wyoming	83422										
5. Organized Under the Laws of: IDAHO W 9397	6.  Signature _____ Date 7-27-01 Name (Type or Printed) Travis L. Bowen Title: Reg. Agent XXXX														

Issued 05/09/2001

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