

No. W 18949	Due no later than Apr 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX CATHERINE E ALLAN 2923 SKYLINE DR TWIN FALLS, ID 83301												
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 S AND C RENTALS L.L.C. 2923 SKYLINE DR TWIN FALLS, ID 83301	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 5%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>member</td> <td>Catherine Allan</td> <td>2923 Skyline Dr.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</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>	member	Catherine Allan	2923 Skyline Dr.	Twin Falls	ID	83301
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member	Catherine Allan	2923 Skyline Dr.	Twin Falls	ID	83301									
5. Organized Under the Laws of: IDAHO W 18949	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Signature <u>Catherine E. Allan</u></td> <td style="width: 60%;">Date <u>2/12/03</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>Catherine E. Allan</u></td> <td>Title <u>member</u></td> </tr> </table>		Signature <u>Catherine E. Allan</u>	Date <u>2/12/03</u>	Name <small>(Typed or Printed)</small> <u>Catherine E. Allan</u>	Title <u>member</u>								
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