No. <b>W 9460</b>		Due no later than Aug 31, 2005			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			NORMAN L. GISSEL			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  NELSEN FAMILY LIMITED LIABILITY COMPANY NORMAN L. GISSEL  1424 SHERMAN AVENUE SUITE 100		1424 SHERMAN AVENUE SUITE 100 COEUR D'ALENE ID 83814 0000  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		COEUR D'ALENE ID 83814 0000						
4. Limited Liability Companie	es: Enter Nai	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	THERON D.	NELSEN	PO BOX 272		LIBERTY LAKE	WA		99019
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
IDAHO W 9460		Signature: Theron D. Nelsen			Date: 08/30/2005			
		Name (type or print): Theron D. Nelsen			Title: President			
Processed 08/30/2005 * Electronically provided signatures are accepted as original signatures.								