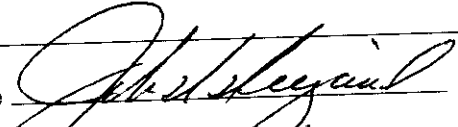
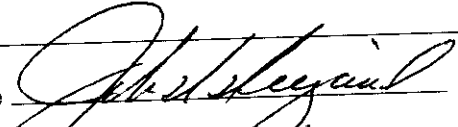
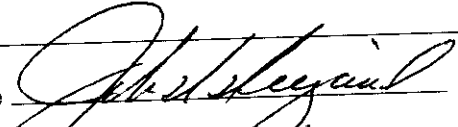


No. W 2836	Due no later than August 31, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX DWAIN H STUFFLEBEAM 195 S BROADWAY BLACKFOOT, ID 83221												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable: FIRST AMERICAN TITLE COMPANY OF VAL PO BOX 580 BLACKFOOT, ID 83221	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>JOHN W WEIGAND</td> <td>P.O. Box 580</td> <td>Blackfoot</td> <td>Idaho</td> <td>83221</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>	Manager	JOHN W WEIGAND	P.O. Box 580	Blackfoot	Idaho	83221
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Manager	JOHN W WEIGAND	P.O. Box 580	Blackfoot	Idaho	83221									
5. Organized Under the Laws of: IDAHO W 2836	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%;"> Signature  </td> <td style="width: 50%;"> Date June 16, 2003 </td> </tr> <tr> <td> Name <small>(Typed or Printed)</small> John W Weigand </td> <td> Title Manager </td> </tr> </table>		Signature 	Date June 16, 2003	Name <small>(Typed or Printed)</small> John W Weigand	Title Manager								
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