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|--|--------------|--|-----------|--|---------|-------------|
| No. C 75730 | | Due no later than May 31, 2005 | | 2. Registered Agent and Address (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 | | 1. Mailing Address: Correct in this box if needed. CITY SERVICE INCORPORATED, OF KALISPELL KURT TONJUM P. O. BOX 1 KALISPELL MT 59903 0001 USA | | ROB COX 2459 HWY 2 OLDTOWN ID 83822 0000 | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| SECRETARY | KURT TONJUM | 1830 3RD AVE EAST, SUITE 202 | KALISPELL | MT | USA | 59901 |
| DIRECTOR | DAVID WAATTI | 1830 3RD AVE EAST, SUITE 202 | KALISPELL | MT | USA | 59901 |
| DIRECTOR | TIM O'NEAL | 1830 3RD AVE EAST, SUITE 202 | KALISPELL | MT | USA | 59901 |
| PRESIDENT | KARY TONJUM | 1830 3RD AVE EAST, SUITE 202 | KALISPELL | MT | USA | 59901 |
| 5. Organized Under the Laws of: MONTANA C 75730 | | 6. Annual Report must be signed.* Signature: Kurt Tonjum Name (type or print): Kurt Tonjum Date: 05/05/2005 Title: Secretary / Treasurer | | | | |
| Processed 05/05/2005 | | * Electronically provided signatures are accepted as original signatures. | | | | |