

No. <u>W 1072</u>	Annual Report Form 19 <u>95</u> Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, if Not Correct <u>FOUR W, L.L.C.</u> <u>W DAVID WORLOW</u> <u>1776 E BRAEMERE RD</u> <u>BOISE</u> <u>ID 83702</u>		<u>W DAVID WORLOW</u> <u>1776 E BRAEMERE RD</u> <u>BOISE</u> <u>ID 83702</u> 3. Organized Under the Laws of: <u>ID</u> <u>W 1072</u>												
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <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><u>MANAGER</u></td> <td><u>W. DAVID WORLOW</u></td> <td><u>1776 E. BRAEMERE RD.</u></td> <td><u>BOISE</u></td> <td><u>ID.</u></td> <td><u>83702</u></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>	<u>MANAGER</u>	<u>W. DAVID WORLOW</u>	<u>1776 E. BRAEMERE RD.</u>	<u>BOISE</u>	<u>ID.</u>	<u>83702</u>
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<u>MANAGER</u>	<u>W. DAVID WORLOW</u>	<u>1776 E. BRAEMERE RD.</u>	<u>BOISE</u>	<u>ID.</u>	<u>83702</u>										
5. SIGNATURE OF CURRENT RA	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>W.D. Worlow</i></u> Date <u>7-13-96</u> Name (Typed or Printed) <u>W.D. WORLOW</u> Title <u>MANAGER</u>														

ISSUED: 37-08-1996

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