No. W 16162	Due no later than August 31, 2006			· · · · · · · · · · · · · · · · · · ·
Return to:	Annual Report Form  1. Mailing Address - Correct in this box, if applicable		Registered Agent and Office NO PO BO     ROBERT J FASNACHT	
SECRETARY OF STATE				
700 WEST JEFFERSON	QUAD PARK CENTER, L.L.C.	000	W IRONWOOD	DR STE 101
PO BOX 83720	1 650 W IRONWOOD DR STE 302		COEUR D ALENE, ID 83814	
BOISE, ID 83720-0080	COEUR D ALENE, ID 83814	j		
NO FILING FEE IF				
DECEMED BY DUE		3. <u>N</u>	New Registered A	gent Signature
RECEIVED BY DUE DATE				•
Limited Liability Companie	s: Enter Names and Addresses of Managers.		· · · · · · · · · · · · · · · · · · ·	
Office held Name	Street or B.O. Addisoners Of Managers.			
· <del></del>	Street or P.O. Address	City	State	Zip
Manager North River, L	LC. 850 W. Ironwood Drive, Ste 302	_		<u> </u>
,			1/ 4 1	and the second s
	511vc, 5te 502	Coeur	d'Alene, ID	83814
	511vc, 5te 502		·	83814
Organized Under the Laws of:			·	83814
Organized Under the Laws of: IDAHO	6.			
Organized Under the Laws of:	6. Signature		·	
Organized Under the Laws of: IDAHO	6.			3/06