No. W 3744	Due no later than Mar 31, 2001	
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	 Mailing Address - Correct in this box, if applicable ISLAND CAPITOL, L.L.C. 	GRAYE H WOLFE SR. 1409 E 1ST ST
BOISE, ID 83720-0080	1409 E 1ST ST	MERIDIAN, ID 83642
NO FILING FEE IF RECEIVED BY DUE DATE	MERIDIAN, ID 83642	3. New Registered Agent Signature
 Limited Liability Compa 	anies: Enter Names and Addresses of Members.	
Office held Name	Addresses of Members.	
	Street or P.O. Address Cit	Y <u>State</u> <u>Zip</u>
2	"O'11'E', Sr. 4119 F 10' 0'	
	Wolfe, Sr. 1409 E. 1st St. Mer	idian ID 83642
. Organized Under the Laws of:	6. 6.	ridian ID 83642
	6. Signature	Date2/16/2001
. Organized Under the Laws of:	6.	Date2/16/2001