

No. W 417		Due no later than Jul 31, 2006		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. INDEPENDENT MORTGAGE LTD. CO. CASEY S KRIVOR PO BOX 905 SANDPOINT ID 83864		CASEY S KRIVOR 506 W ALDER STE 200 SANDPOINT ID 83864	
				3. <u>New</u> Registered Agent Signature: *	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	FULL SPECTRUM , INC.	PO BOX 905	SANDPOINT	ID	83864
5. Organized Under the Laws of: IDAHO W 417		6. Annual Report must be signed.* Signature: Casey S. Krivor Name (type or print): Casey S. Krivor Date: 05/08/2006 Title: CEO, Full Spectrum, Inc.			
Processed 05/08/2006		* Electronically provided signatures are accepted as original signatures.			