	Due no later than January 31, 2004	Registered Agent and Office NO PO BOX
No. W 17890	Annual Report Form	THOMAS L KELLY
Return to:	1 Mailing Address. Correct in this box if applicable	3855 E POLELINE RD
SECRETARY OF STATE	CONTROLWORX, LLC	
700 WEST JEFFERSON		POST FALLS, ID 83854
PO BOX 83720 BOISE, ID 83720-0080	3855 E POLELINE RD	(2:
BOISE, ID 65720-0000		3. New Registered Agent Signature
NO FILING FEE IF	POST FALLS, ID 83854	
SECULED BY DUE DATE		
4 Limited Liability Com	panies: Enter Names and Addresses of Managers.	
THIRD Eldoning Com	Street or P.O. Address JESSAN 1721 5th St. Chenty Kelly 5GO Shorzpines Post Fai	ity <u>State</u> <u>Zip</u>
Office held Name	12 - 12 C/	111-A 99M4
Manager Kory Roll	russen Mais = St. (Mile)	$\gamma = \omega \gamma = \gamma = \gamma$
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manage Thomas	KULL 500 Shortplas 1008/19	
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5. Organized Under the Laws of	of: 6. Thereas L	Kelle Date 11/12/03
5. Organized Under the Laws of	of: 6. Signature Thomas L1	Kelly Date 11/12/03
IDAHO	Signature Thomas 4/2	
	\sim 1	114 Title Managel
IDAHO	Signature Thomas Ko	