

No. W 6610	Due no later than July 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX ALBERT T WADA 325 S 1400 W PINGREE, ID 83262												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable FAW, L.L.C. ALBERT T WADA 326 S 1400 W PINGREE, ID 83262		3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>ALBERT T. WADA</td> <td>326 S 1400 W</td> <td>PINGREE</td> <td>ID</td> <td>83262</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	MEMBER	ALBERT T. WADA	326 S 1400 W	PINGREE	ID	83262
Office held	Name	Street or P.O. Address	City	State	Zip										
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5. Organized Under the Laws of: IDAHO W 6610		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Signature <u>Albert T Wada</u></td> <td style="width: 50%;">Date <u>5-6-05</u></td> </tr> <tr> <td>Name <small>(Type in full)</small> <u>ALBERT T. WADA</u></td> <td>Title <u>MEMBER</u></td> </tr> </table>		Signature <u>Albert T Wada</u>	Date <u>5-6-05</u>	Name <small>(Type in full)</small> <u>ALBERT T. WADA</u>	Title <u>MEMBER</u>								
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