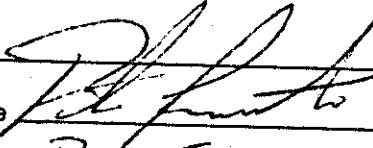


No. W 45932		Due no later than December 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable FOUNTAIN FLYING SERVICE - GENESEE, PO BOX 416 GENESEE, ID		PETER FOUNTAIN 134 N TAMARACK GENESEE, ID 83832		
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Managers.						
Office held	Name	Street or P.O. Address	City	State	Zip	
MANAGER	PEPE FOUNTAIN	P.O. Box 416	GENESEE	ID	83832	
5. Organized Under the Laws of:		6. Signature _____ Date 10-16-06				
IDAHO W 45932		Signature  Name (Typed or Printed) PETE FOUNTAIN Title MANAGER				

Issued 10/02/2006

Do Not Tape or Staple

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