	Due no later than Apr 30, 2001	2 Decision 14
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BO
SECRETARY OF STATE	Mailing Address - Correct in this box, if applicable	SCOTT A TSCHIRGI
700 WEST JEFFERSON	KELID CO	1216 HARCOURT DR
PO BOX 83720	SCOTT A TSCHIRGI	
BOISE, ID 83720-0080	1216 HARCOURT DR	BOISE, ID 83702
NO FILING FEE IF	BOISE, ID 83702	2 No. (D
RECEIVED BY DUE DATE	BOIOE, ID 83702	3. New Registered Agent Signature
4. Limited Liability Come	nonice Full Al	
	panies: Enter Names and Addresses of Managers.	
Office held Name	Street or P.O. Address	·
MANAger Scott T		State Zip JJ 8376Z
Manager Scan 1	Hors.	e Id 83707
		- <del> </del>
		- <u>-</u>
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		- <u>-</u>
5. Organized Under the Laws of:	6.	
IDAHO	Signature // Sery	Date <b>Z</b> -/ <b>7</b> . o/
	Signature // Sery	Date <b>Z</b> ~/ <b>7</b> . o/
IDAHO	Signature Ase	Date <b>Z</b> -/ <b>7</b> . o/