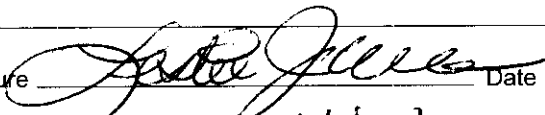
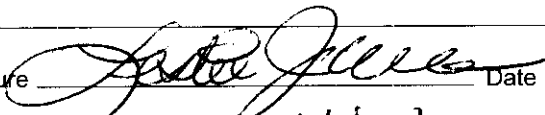
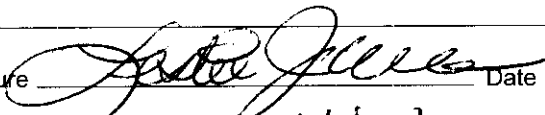


No. W 11760	Due no later than Apr 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable LES WILSON TRUCKING, L.L.C. 3193 N 3200 E TWIN FALLS, ID 83301	LESLIE J WILSON 3193 N 3200 E TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature																	
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>LESLIE J. Wilson</td> <td>3193 N 3200 E</td> <td>TWIN FALLS</td> <td>Id</td> <td>83301</td> </tr> <tr> <td>MANAGER</td> <td>MARILYNN L. Wilson</td> <td>3193 N 3200 E</td> <td>TWIN FALLS</td> <td>Id</td> <td>83301</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	LESLIE J. Wilson	3193 N 3200 E	TWIN FALLS	Id	83301	MANAGER	MARILYNN L. Wilson	3193 N 3200 E	TWIN FALLS	Id	83301
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