

No. W 17551	Due no later than December 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX HENRY COVELLI 5583 SHORELINE DR POST FALLS, ID 83854
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. HERON, L.L.C. HENRY COVELLI 5583 SHORELINE DR POST FALLS, ID 83854		3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Henry D Covelli	710 S. Main St 5583 Shoreline Dr	Post Falls	Id	83854

5. Organized Under the Laws of: IDAHO	6. Signature <u>HD Covelli</u> Date <u>10/20/03</u> Name (Typed or Printed) <u>Henry D Covelli</u> Title <u>president</u>
--	--