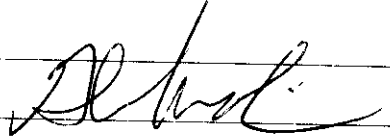


No. C 96547	Due no later than October 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX TONI MUIRBROOK 720 1ST AVE N KETCHUM, ID 83333																														
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable: MOUNTAIN STATES SUPPLY, INC. TONI MUIRBROOK PO BOX 6947 KETCHUM, ID 83340		3. <u>New</u> Registered Agent Signature																														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <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>President</td> <td>Toni Muirbrook</td> <td>Box 6947</td> <td>Ketchum</td> <td>ID</td> <td>83340</td> </tr> <tr> <td>Vice President</td> <td>Glen Muirbrook</td> <td>Box 6947</td> <td>Ketchum</td> <td>ID</td> <td>83340</td> </tr> <tr> <td>Treasurer</td> <td>Toni Muirbrook</td> <td>Box 6947</td> <td>Ketchum</td> <td>ID</td> <td>83340</td> </tr> <tr> <td>Secretary</td> <td>Glen Muirbrook</td> <td>Box 6947</td> <td>Ketchum</td> <td>ID</td> <td>83340</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Toni Muirbrook	Box 6947	Ketchum	ID	83340	Vice President	Glen Muirbrook	Box 6947	Ketchum	ID	83340	Treasurer	Toni Muirbrook	Box 6947	Ketchum	ID	83340	Secretary	Glen Muirbrook	Box 6947	Ketchum	ID	83340
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5. Organized Under the Laws of: IDAHO C 96547		6. Signature  Name (Typed or Printed) <u>Glen Muirbrook</u> Title <u>Vice President</u>																															

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