

No. W 11194	Due no later than Feb 28, 2001		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	Annual Report Form		GLENNA TOOMAN													
	1. Mailing Address - Correct in this box, if applicable MEMORY MAKERS EVENT PLANNING, L.L.C 9116 HALSTEAD DR BOISE, ID 83704		9116 HALSTEAD DR BOISE, ID 83704 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>GLENNA TOOMAN</td> <td>9116 HALSTEAD DR.</td> <td>BOISE</td> <td>ID</td> <td>83704</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	GLENNA TOOMAN	9116 HALSTEAD DR.	BOISE	ID	83704
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
MANAGER	GLENNA TOOMAN	9116 HALSTEAD DR.	BOISE	ID	83704											
5. Organized Under the Laws of: IDAHO W 11194		6. Signature <u>Glenna Tooman</u> Date <u>12/15/00</u> Name (Typed or Printed) <u>GLENNA TOOMAN</u> Title: <u>MANAGER/owner</u>														