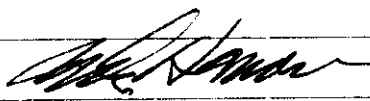


No. C 124893	Due no later than July 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX MICHAEL S HOMAN 2229 W STATE ST STE B BOISE, ID 83702
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ORCHARD RETAIL SHOPPING CENTER, INC MICHAEL S HOMAN 2229 W STATE ST 2229 W. State St. BOISE, ID 83702 83702 Suite B	3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Michael S. Homan	2229 W. State St. Ste B.	Boise	ID	83702
Secretary	Michael S. Homan	Same Address			
Director	Same	Same			

5. Organized Under the Laws of: IDAHO C 124893	6.  Signature _____ Date 6/7/05 Name <small>(Typed or Printed)</small> Michael S. Homan Title President
----------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------