

No. W 11926

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

1. Mailing Address - Correct in this box, if applicable

BRUCE LEIBOLD
1029 VALE RD

HARVARD, ID 83834

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New 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>
member	Bruce Leibold	1029 Vale Rd	Harvard	ID	83834

5. Organized Under the Laws of:

IDAHO
W 11926

6.

Signature

Bruce Leibold

Date

3-10-03Name
(Typed or
Printed)Bruce Leibold

Title

owner

Do Not Tape or Staple

1134