

No. W 28776	Due no later than February 28, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX PATRICIA GARVEY REED 143 N MAIN ST VICTOR, ID 83455												
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 PIERRE'S OLD TIME PHOTOS, LLC PATRICIA REED 210 SORENSEN CREEK DR VICTOR, ID 83455		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Member Patricia Reed</td> <td>210 Sorensen</td> <td>Victor</td> <td>ID</td> <td>83455</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>		Member Patricia Reed	210 Sorensen	Victor	ID	83455
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
	Member Patricia Reed	210 Sorensen	Victor	ID	83455										
5. Organized Under the Laws of: IDAHO W 28776		6. Signature <u>Patricia Reed</u> Date <u>2-28-05</u> Name <small>(Typed or Printed)</small> <u>Patricia Reed</u> Title <u>Member</u>													