| No. C 129354   | Due no later than June 30, 2004  |                   | 2. Registered Agent and Office NO PO BOX        |                      |
|--|--|-------------------|---|----------------------|
| Return to:<br>SECRETARY OF STATE                               | Annual Report Form  1. Mailing Address - Correct in this box, if applicable  OCLASSEN HOME, INC. PO BOX 5344 KETCHUM, ID 83340   |                   | CARON OCLASSEN 530 BUCKHORN DR HAILEY, ID 83333 |                      |
| 700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080     |  |                   |   |                      |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE                       |  | 3                 | . <u>New</u> Registered                         | Agent Signature      |
| 4. Corporations: Enter Nar                                     | mes and Business Addresses of Pre  | sident, Secretary | and Directors                                   |                      |
| Office held Name   | Street or P.O. Address   | City              | State   | <u> Zip</u>          |
| Dres Caron Oc  | lassen to Box 5344   | Ketchu            | m ID  | 8 3340               |
|  | lassen Po Box 5344   | Retan             | m ID  | ¥ 3346               |
| Fres. Caron Oc  5. Organized Under the Laws of: IDAHO C 129354 | 6. Signature Name Printed  Output  Description:  Output  Descr | De                | Date<br>Title                                   | 4/15/04<br>President |