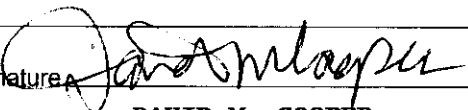


No. W 2879 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Sep 30, 2000 Annual Report Form 1. Mailing Address - Correct in this box, if applicable COOPER NORMAN & CO., CERTIFIED PUBL DAVID M COOPER P O BOX 394 TWIN FALLS, ID 83303	2. Registered Agent and Office NO PO BOX DAVID M COOPER 155 SECOND AVE N TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature
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4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGING MEMBER	DAVID M. COOPER, CPA PA	PO BOX 394	TWIN FALLS	IDAHO	83303-0394
MEMBER	ROBERT A. NORMAN, CPA PA	PO BOX 394	TWIN FALLS	IDAHO	83303-0394
MEMBER	RONALD L. BELLISTON, CPA PA	PO BOX 394	TWIN FALLS	IDAHO	83303-0394
MEMBER	J. DAVID STODDARD, CPA PA	PO BOX 51330	IDAHO FALLS	IDAHO	83405
MEMBER	CLINT TAVENNER, CPA PA	PO BOX 51330	IDAHO FALLS	IDAHO	83405
MEMBER	TERRI GAZDIK, CPA PA	PO BOX 51330	IDAHO FALLS	IDAHO	83405
MEMBER	JANET L. ROE, CPA PA	PO BOX 394	TWIN FALLS,	IDAHO	83303-0394
MEMBER	MARILEE ALLISON, CPA PA	PO BOX 394	TWIN FALLS,	IDAHO	83303-0394

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 2879</div>	6.  Signature _____ Date <u>7/26/2000</u> <div style="display: flex; justify-content: space-between;"> <div> (Typed or Printed) Name DAVID M. COOPER </div> <div> Title: MANAGING Time: MEMBER XXXX </div> </div>
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Issued 07/10/2000

Do Not Tape or Staple

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