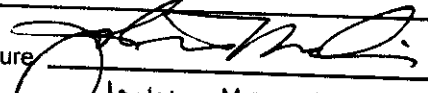
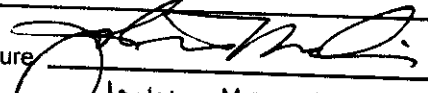
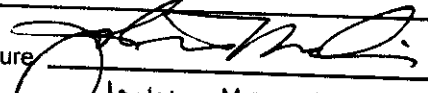


FILED EFFECTIVE

## REINSTATEMENT

No. <b>W 4620</b>	<b>Annual Report Form</b> ADMIN DISSOLVED 12/05/2003		2. Registered Agent and Office <b>NOT A P.O. BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>FEE DUE \$30.00</b>	1. Mailing Address - Correct in this box, if applicable		JOHN T MELIN 110 COMFORT CIR  KETCHUM, ID 83340													
	RED ROCKS LIMITED COMPANY JOHN T MELIN PO BOX 6889  KETCHUM, ID 83340															
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)																
<table border="0"><thead><tr><th><u>Office held</u></th><th><u>Name</u></th><th><u>Street or P.O. Address</u></th><th><u>City</u></th><th><u>State</u></th><th><u>Zip</u></th></tr></thead><tbody><tr><td>Manager</td><td>John T. Melin</td><td>110 Comfort Cir.</td><td>Ketchum,</td><td>ID</td><td>83340</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>	Manager	John T. Melin	110 Comfort Cir.	Ketchum,	ID	83340
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5. Organized under the laws of:  IDAHO W 4620		6. <table border="0"><tr><td>Signature</td><td></td><td>Date</td><td colspan="2">2/11/04</td></tr><tr><td>Name</td><td>(Typed or Printed) JOHN MELIN</td><td>Title</td><td colspan="2">MANAGER</td></tr></table>			Signature		Date	2/11/04		Name	(Typed or Printed) JOHN MELIN	Title	MANAGER			
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Issued 01/30/2004