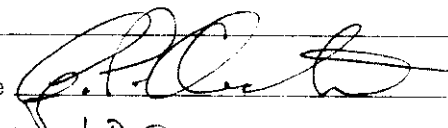


No. W 8930	Due no later than June 30, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX JEFFREY P OESTERLING 1592 E INMAN RD INKOM, ID 83245												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable CREATIVE LANDSCAPING, LTD. CO. JEFFREY P OESTERLING 1592 E INMAN RD INKOM, ID 83245	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>J.P. OESTERLING</td> <td>1592 E INMAN RD.</td> <td>INKOM</td> <td>ID</td> <td>83245</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	J.P. OESTERLING	1592 E INMAN RD.	INKOM	ID	83245
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
MEMBER	J.P. OESTERLING	1592 E INMAN RD.	INKOM	ID	83245									
5. Organized Under the Laws of: IDAHO W 8930	6. Signature  Date <u>4/11/05</u> Name (Typed or Printed): <u>J.P. OESTERLING</u> Title <u>MEMBER</u>													

Issued 04/01/2005

Do Not Tape or Staple

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