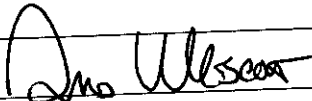


No. W 4622	Due no later than Sep 30, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX DAVID L WESCOTT 1808 MORNINGSIDE DR REXBURG, ID 83440																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable BACKTRACKS, LLC DAVID L WESCOTT 1808 MORNINGSIDE DR REXBURG, ID 83440	3. New 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;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>DAVID WESCOTT</td> <td>PO Box 905</td> <td>REXBURG</td> <td>ID.</td> <td>83440</td> </tr> <tr> <td>CONTROLLER</td> <td>PAUL WESCOTT</td> <td>PO Box 905</td> <td>REXBURG</td> <td>ID</td> <td>83440</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	DAVID WESCOTT	PO Box 905	REXBURG	ID.	83440	CONTROLLER	PAUL WESCOTT	PO Box 905	REXBURG	ID	83440
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CONTROLLER	PAUL WESCOTT	PO Box 905	REXBURG	ID	83440															
5. Organized Under the Laws of: IDAHO W 4622	6. Signature <u></u> Date <u>7/11/01</u> Name (Typed or Printed) <u>DAVID WESCOTT</u> Title <u>Manager</u>																			