

No. <b>W 3072</b>	<b>Due no later than Oct 31, 2000</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>														
	1. Mailing Address - Correct in this box, if applicable WEST VALLEY INSURANCE & REALTY, LLC GAIL M. HAYNES PO BOX 504  PINEHURST, ID 83850		GAIL M. HAYNES FAIRWAY SHOPPING CENTER  PINEHURST, ID 83850  3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <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>GAIL M HAYNES</td> <td>P.O. Box 504</td> <td>PINEHURST</td> <td>IDA</td> <td>83850</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	GAIL M HAYNES	P.O. Box 504	PINEHURST	IDA	83850
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER	GAIL M HAYNES	P.O. Box 504	PINEHURST	IDA	83850										
5. Organized Under the Laws of:  IDAHO W 3072		6. Signature <u>Gail M. Haynes</u> 10-31-00 Name (Typed or Printed) <u>GAIL M HAYNES</u> Title <u>MANAGER</u>													