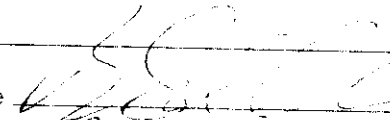


No. W 23007	Due no later than March 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX R SAN ALESSI 697 MARJORIE IDAHO FALLS, ID 83401												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ALMANAC SYSTEMS, LLC 697 MARJORIE AVE IDAHO FALLS, ID 83401		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President / CEO</td> <td>R. Samuel Alessi</td> <td>697 Marjorie Ave</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</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>	President / CEO	R. Samuel Alessi	697 Marjorie Ave	Idaho Falls,	ID	83401
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President / CEO	R. Samuel Alessi	697 Marjorie Ave	Idaho Falls,	ID	83401										
5. Organized Under the Laws of: IDAHO W 23007		6.  Signature _____ Date <u>3/30/05</u> Name (Typed or Printed) <u>R. Samuel Alessi</u> Title <u>President</u>													

Issued 01/03/2005

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