	Due no later than February 29, 2004	2 Posistand A L Loss
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	Mailing Address - Correct in this box of applicable	MICHAEL MARKLEY
700 WEST JEFFERSON PO BOX 83720	MARKLEY COMMUNICATION SERVICES LLC	5660 DRAWBRIDGE DR
BOISE, ID 83720-0080	MICHAEL MARKLEY	BOISE, ID 83703
- 1.02, 12 00720-0000	5660 DRAWBRIDGE DR	DOIGE, ID 63/03
NO FILING FEE IF	BOISE ID 83703	3. New Registered Agent Signature
RECEIVED BY DUE DATE		section rigorit dignature
	es: Enter Names and Addresses of Managers.	
Office held Name		
<u> </u>	Street or P.O. Address City	State Zip
PRINCIPM MICHAEL	MARKLEY 5000 PRANBEIDGE BOISE	E 10 83703
	<b>'</b>	85763
5. Organized Under the Laws of:	6. // /	
IDAHO	6. Signature <i>M.</i>	
		Date <u>12.30.03</u> Title <u>Райца</u> га