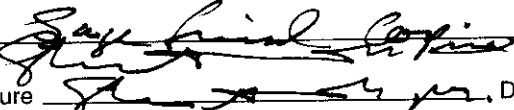
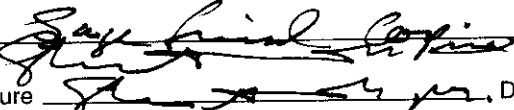
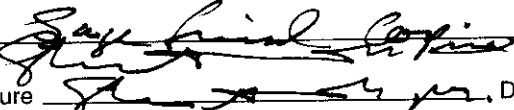


No. W 4740	Due no later than October 31, 2005		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		STEVEN GIACOBBI													
	1. Mailing Address - Correct in this box, if applicable WEST EMERALD, L.L.C. PO BOX 3056 KETCHUM, ID 83340		213 TEAL DR HAILEY, ID 83333 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>Sage Financial Corp</td> <td>Box 3056</td> <td>Ketchum</td> <td>ID</td> <td>83340</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	Sage Financial Corp	Box 3056	Ketchum	ID	83340
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Manager	Sage Financial Corp	Box 3056	Ketchum	ID	83340											
5. Organized Under the Laws of: IDAHO W 4740	6. <table border="1"> <tr> <td>Signature </td> <td>Date 8/9/05</td> </tr> <tr> <td>Name (Typed or Printed) Steven Giacobbi</td> <td>Title President</td> </tr> </table>				Signature 	Date 8/9/05	Name (Typed or Printed) Steven Giacobbi	Title President								
Signature 	Date 8/9/05															
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Issued 08/01/2005

Do Not Tape or Staple

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