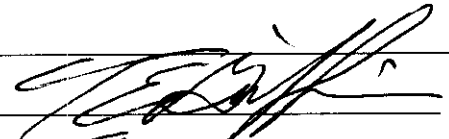


No. W 35750	Due no later than January 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX THEODORE EARL GRIFFIN III 6009 W ROBERTSON DR BOISE, ID 83709												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable RIVER CITY ASSETS, LLC THEODORE EARL GRIFFIN III 6009 W ROBERTSON DR BOISE, ID 83709		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: center; border-bottom: 1px solid black;">Office held</th> <th style="text-align: center; border-bottom: 1px solid black;">Name</th> <th style="text-align: center; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: center; border-bottom: 1px solid black;">City</th> <th style="text-align: center; border-bottom: 1px solid black;">State</th> <th style="text-align: center; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">OWNER</td> <td style="text-align: center;">THEODORE E GRIFFIN III</td> <td style="text-align: center;">6009 ROBERTSON DR.</td> <td style="text-align: center;">BOISE</td> <td style="text-align: center;">ID</td> <td style="text-align: center;">83709</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	OWNER	THEODORE E GRIFFIN III	6009 ROBERTSON DR.	BOISE	ID	83709
Office held	Name	Street or P.O. Address	City	State	Zip										
OWNER	THEODORE E GRIFFIN III	6009 ROBERTSON DR.	BOISE	ID	83709										
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 35750</div>	6. Signature  Date <u>2 JAN 05</u> Name (Typed or Printed) <u>THEODORE E. GRIFFIN III</u> Title <u>OWNER</u>														