

<b>No. C 45721</b>	<b>Due no later than Jun 30, 2001 Annual Report Form</b>		<b>2. Registered Agent and Office 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>1. Mailing Address - Correct in this box, if applicable</b>  HAWKINS PAC-OUT, INC. SANDRA MAGETTE <del>415 S 4TH ST</del> 205 N 10 <sup>th</sup> SUITE 300 BOISE, ID 83702 7620		SANDRA MAGETTE, C.P.A. <del>415 S 4TH ST</del> 205 N 10 <sup>th</sup> STE 300 BOISE, ID 83702 7620																		
<b>3. New Registered Agent Signature</b>																					
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</b> <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>Pres</td> <td>Patricia Hawkins</td> <td>CMR 427, Box 1042</td> <td>APD AE</td> <td></td> <td>09630</td> </tr> <tr> <td>VP/Sec</td> <td>Pamela D. Gehlken</td> <td>P.O. Box 5577</td> <td>Shasta Lake</td> <td>CA</td> <td>96089</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>	Pres	Patricia Hawkins	CMR 427, Box 1042	APD AE		09630	VP/Sec	Pamela D. Gehlken	P.O. Box 5577	Shasta Lake	CA	96089
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																
Pres	Patricia Hawkins	CMR 427, Box 1042	APD AE		09630																
VP/Sec	Pamela D. Gehlken	P.O. Box 5577	Shasta Lake	CA	96089																
<b>5. Organized Under the Laws of:</b>  IDAHO C 45721	<b>6.</b> Signature <u>Pamela D. Gehlken</u> Date <u>5/9/01</u> Name (Typed or Printed) <u>Pamela D. Gehlken</u> Title: <u>Sec/V.P.</u> XXXX																				