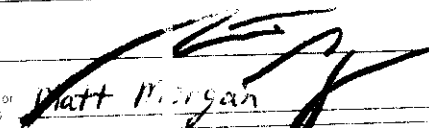


No. W 9303	Due no later than July 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX MATT MORGAN 2085 W OMNI DR IDAHO FALLS, ID 83402												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable BLACKHAWK ESTATES LIMITED LIABILITY MATT MORGAN 2085 W OMNI DR PO Box 1604 IDAHO FALLS, ID 83402 <div style="text-align: center;">3</div>		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;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>member</td> <td>Matt Morgan</td> <td>PO Box 1604</td> <td>Idaho Falls</td> <td>ID</td> <td>83403</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>	member	Matt Morgan	PO Box 1604	Idaho Falls	ID	83403
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
member	Matt Morgan	PO Box 1604	Idaho Falls	ID	83403										
5. Organized Under the Laws of: IDAHO W 9303	6. Signature  _____ Name <small>(If typed or printed)</small> <u>Matt Morgan</u> Title <u>managing member</u>														
Issued 05/02/2005		Do Not Tape or Staple													

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