

No. W 12096

Due no later than May 31, 2005
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

LUPIN, LIMITED LIABILITY COMPANY
PO BOX 457
VICTOR, ID 83455

JAMES M ST CLAIR
726 LAKESIDE DRIVE
VICTOR, ID 83455

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
managing member	James M StClair	PO BOX 457	Victor	ID	83455

5. Organized Under the Laws of:

IDAHO
W 12096

6.

Signature

Name

(Typed or
Printed)

James M. St. Clair

Date

4/1/05

Title

managing member

Issued 03/01/2005

Do Not Tape or Staple

200505000798