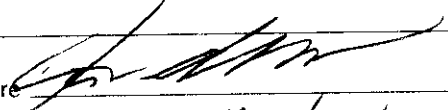


No. <b>W 5370</b>	<b>Due no later than January 31, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable		JON HOLLEY 4477 S 65TH W IDAHO FALLS, ID 83402																								
	HOLLEY LAND, L.L.C. JON HOLLEY 4477 S 65TH W IDAHO FALLS, ID 83402																										
3. <u>New</u> Registered Agent Signature																											
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>mgr</td> <td>Jon Holley</td> <td>5403 S 65W.</td> <td>IF</td> <td>ID</td> <td>83402</td> </tr> <tr> <td>mgr</td> <td>MATT HOLLEY</td> <td></td> <td>Staley</td> <td>ID</td> <td>83274</td> </tr> <tr> <td>mgr</td> <td>Andy Holley</td> <td>4477 S 65W.</td> <td>IF</td> <td>ID</td> <td>83402</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	mgr	Jon Holley	5403 S 65W.	IF	ID	83402	mgr	MATT HOLLEY		Staley	ID	83274	mgr	Andy Holley	4477 S 65W.	IF	ID	83402
Office held	Name	Street or P.O. Address	City	State	Zip																						
mgr	Jon Holley	5403 S 65W.	IF	ID	83402																						
mgr	MATT HOLLEY		Staley	ID	83274																						
mgr	Andy Holley	4477 S 65W.	IF	ID	83402																						
5. Organized Under the Laws of:  IDAHO W 5370		6.  Signature _____ Date <u>12-9-04</u> Name <small>Typed or Printed</small> <u>Jon Holley</u> Title <u>mgr</u>																									