

| No. W 9625 | Due no later than Aug 31, 2000 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 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address - Correct in this box, if applicable CAPITAL CITY MANAGEMENT, LLC R JOHN INSINGER 7116 MCMULLEN BOISE, ID 83709 | R JOHN INSINGER 7116 MCMULLEN BOISE, ID 83709 3. <u>New</u> Registered Agent Signature | | | | | | | | | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" style="width: 100%;"> <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>Manager</td> <td>R. John Insinger</td> <td>7116 McMullen</td> <td>Boise</td> <td>ID</td> <td>83709</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> | Manager | R. John Insinger | 7116 McMullen | Boise | ID | 83709 |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | |
| Manager | R. John Insinger | 7116 McMullen | Boise | ID | 83709 | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 9625 | 6. Signature  Date <u>Oct. 18, 2000</u> Name <small>(Typed or Printed)</small> <u>R. John Insinger</u> Title: <u>Manager</u> Use XXXX | | | | | | | | | | | | | |

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