

<b>No. W 934</b>	<b>Due no later than Mar 31, 2001</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b> MAC EVANS 3193 KIMBERLY RD TWIN FALLS, ID 83301																		
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 TWIN STOP, L.L.C. MAC EVANS PO BOX 425 TWIN FALLS, ID 83303		3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>MAC EVANS</td> <td>P.O. Box 425</td> <td>TWIN falls</td> <td>ID</td> <td>83303</td> </tr> <tr> <td>MEMBER</td> <td>JANICE EVANS</td> <td>P.O. Box 425</td> <td>TWIN falls</td> <td>ID</td> <td>83303</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	MAC EVANS	P.O. Box 425	TWIN falls	ID	83303	MEMBER	JANICE EVANS	P.O. Box 425	TWIN falls	ID	83303
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5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 934</div>	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature <u>Mac Evans</u></td> <td style="width: 40%;">Date <u>1-11-01</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>MAC EVANS</u></td> <td>Title: <u>MEMBER</u></td> </tr> </table>			Signature <u>Mac Evans</u>	Date <u>1-11-01</u>	Name <small>(Typed or Printed)</small> <u>MAC EVANS</u>	Title: <u>MEMBER</u>														
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