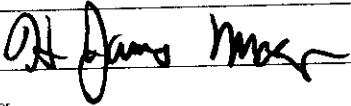


No. W 10420	Due no later than December 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		H JAMES MAGNUSON 1250 NORTHWOOD CENTER CT COEUR D'ALENE, ID 83814												
	MAGNUSON LEWISTON CENTER, L.L.C. H JAMES MAGNUSON PO BOX 2238 COEUR D'ALENE, ID 83814		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>H. James Magnuson</td> <td>P.O. Box 2288</td> <td>Coeur d'Alene</td> <td>ID</td> <td>83816</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	H. James Magnuson	P.O. Box 2288	Coeur d'Alene	ID	83816
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Manager	H. James Magnuson	P.O. Box 2288	Coeur d'Alene	ID	83816										
5. Organized Under the Laws of: IDAHO W 10420		6. Signature <u></u> Date <u>10-10-03</u> Name (Typed or Printed) _____ Title <u>Manager</u>													