

| <b>No. W 20625</b>  | <b>Due no later than September 30, 2003</b><br><b>Annual Report Form</b>   | 2. Registered Agent and Office <b>NO PO BOX</b><br>LARRY KOHLER<br>735 E 700 N<br>FIRTH, ID 83236 |                               |                    |   |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
|---|--|---|-------------------------------|--------------------|---|----------------------|--------------|------------|---------|--------------|-------------|-------|-----|-------|---------|------------------|---------------|--|--|--|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>         RECEIVED BY DUE DATE</b>   | 1. Mailing Address - Correct in this box, if applicable<br>WEST BRIDGE-SNAKE RIVER PLAZA, L.C.<br><br>735 E 700 N<br><br>FIRTH, ID 83236   | 3. <u>New</u> Registered Agent Signature  |                               |                    |   |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; margin-top: 10px;"> <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>LARRY KOHLER</td> <td>735 E 700 N</td> <td>FIRTH</td> <td>IDA</td> <td>83236</td> </tr> <tr> <td>MANAGER</td> <td>ANNA RUTH KOHLER</td> <td colspan="4">SAME AS ABOVE</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 | LARRY KOHLER | 735 E 700 N | FIRTH | IDA | 83236 | MANAGER | ANNA RUTH KOHLER | SAME AS ABOVE |  |  |  |
| <u>Office held</u>  | <u>Name</u>  | <u>Street or P.O. Address</u>   | <u>City</u>                   | <u>State</u>       | <u>Zip</u>                                  |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
| MANAGER   | LARRY KOHLER   | 735 E 700 N   | FIRTH                         | IDA                | 83236                                       |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
| MANAGER   | ANNA RUTH KOHLER   | SAME AS ABOVE   |                               |                    |   |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>W 20625   | 6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature <u>Larry Kohler</u></td> <td style="width: 40%;">Date <u>8/2/03</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>LARRY KOHLER</u></td> <td>Title <u>MANAGER</u></td> </tr> </table> |   | Signature <u>Larry Kohler</u> | Date <u>8/2/03</u> | Name (Typed or Printed) <u>LARRY KOHLER</u> | Title <u>MANAGER</u> |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
| Signature <u>Larry Kohler</u>   | Date <u>8/2/03</u>   |   |                               |                    |   |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |
| Name (Typed or Printed) <u>LARRY KOHLER</u>   | Title <u>MANAGER</u>   |   |                               |                    |   |                      |              |            |         |              |             |       |     |       |         |                  |               |  |  |  |