

ISSUED: 07-05-1994

No. 72	Idaho Limited Liability Company Annual Report Form												
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	<p>Due No Later Than November 1, 1994</p> <p>1. Mailing Address — <i>Valley Capital, An Idaho Limited Liability Company</i></p> <p>VALLEY CAPITAL, AN IDAHO LIMITED LIABILITY COMPANY S. WARDE LEVIE 150 HULEN WAY N KETCHUM</p> <p>P.O. Box 1513 1513 SUN VALLEY, ID. 83353 ID 83340</p>												
<p>2. Registered Agent and Office</p> <p>SANDRA WARDE-LEVIE 150 HULEN WAY → 100 WEDDIN LANE SUN VALLEY, ID. 83353</p> <p>KETCHUM ID 83340</p> <p>3. Organized Under The Laws of ID NO: 72</p>													
<p>4. Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</p> <p>MUST BE PRINTED OR TYPE</p> <table> <tr> <td>Name</td> <td>Street or P.O. Address</td> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td>AS ABOVE SANDRA W. LEVIE</td> <td>Box 1513</td> <td>S. V.</td> <td>ID</td> <td>83353</td> </tr> </table>				Name	Street or P.O. Address	City	State	Zip	AS ABOVE SANDRA W. LEVIE	Box 1513	S. V.	ID	83353
Name	Street or P.O. Address	City	State	Zip									
AS ABOVE SANDRA W. LEVIE	Box 1513	S. V.	ID	83353									
<p>5. Signature of the Current Registered Agent (if changed in block 2)</p> <p><i>S. Warde-levie</i></p>		<p>6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.</p> <p>Signature <i>S. Warde-levie</i> Name <small>Printed or typed</small> <i>SANDRA Warde-Levie</i></p> <p>Date <i>7/22/94</i></p>											