

No. W 8965	Due no later than Jun 30, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX DALE R HUFFAKER 3929 ANTELOPE RD MOORE, ID 83255
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 LOST RIVER TRANSPORT AND DELIVERY, DALE R HUFFAKER 3929 ANTELOPE RD MOORE, ID 83255	3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
member	Dale Huffaker	3929 Antelope Rd.	Moore	ID	83255
member	Russ Mayne	597 Wayne	Pocatello	ID	83201

5. Organized Under the Laws of: IDAHO W 8965	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <u>Colleen Huffaker</u> </td> <td style="width: 40%;"> Date <u>4-30-01</u> </td> </tr> <tr> <td> Name <small>(Typed or Printed)</small> <u>Colleen Huffaker</u> </td> <td> Title: <u>secretary</u> XXXX </td> </tr> </table>	Signature <u>Colleen Huffaker</u>	Date <u>4-30-01</u>	Name <small>(Typed or Printed)</small> <u>Colleen Huffaker</u>	Title: <u>secretary</u> XXXX
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