

No. W 20877	Due no later than September 30, 2004 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	<div style="background-color: black; color: white; text-align: center; padding: 2px;"> 1. Mailing Address - Correct in this box, if applicable </div> ROBERT S. CONNER LLC PO BOX 392 NEW MEADOWS, ID 83654		ROBERT S CONNER 417 SPEER ST NEW MEADOWS, ID 83654
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Robert S. Conner	P.O. Box 392	New Meadows	Idaho	83654

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 20877</div>	6. Signature <u>Robert S. Conner</u> Date <u>7-18-04</u> Name <small>(Typed or Printed)</small> <u>Robert S. Conner</u> Title <u>Manager</u>
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Do Not Tape or Staple

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